



**South Dakota Provider
Medicaid Portal
User Guide**

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Overview

The South Dakota Provider Medicaid Portal (Portal) has been a collaborative effort with providers to ensure an end result that will be fully utilized by and directly beneficial to, SD Medicaid Providers. The Portal was designed to increase a provider's ability to view, download, and save digital copies of their SD Medicaid Remittance Advices, or Remits (RAs), in concert with payments. The scope of functionality within the Portal is planned to expand to include Eligibility Status Inquiry and access to additional reports: Adult Services and Aging and Cost Settlement Reports.

Medicaid Portal Functionality

The Medicaid Portal Functionality has three main components: 1) registering your account and logging into the system, 2) administrative functions to add, update and manage your organization's Portal user accounts as needed, and 3) retrieve, view, print and save Reports electronically. Each of these components, as well as further instruction, is outlined below.

Provider Collaboration & Feedback

The DSS Medicaid Portal Team would like to thank our providers for their integral role in ensuring that the Portal delivers features and benefits, which improve and expedite access to SD Medicaid reports and data. We appreciate the time you have taken to collaborate, test and send feedback on this new application. We will continue to welcome provider participation and feedback as additional functionality and features are developed in the Medicaid Portal. We encourage all users to send us feedback throughout the implementation of new design and functionality as well as continued feedback regarding improvements which will aide in our ability to improve and support the needs of our providers. Please communicate any comments, feedback, concerns or issues to our Medicaid Portal Team's email address: DSSOnlinePortal@state.sd.us.

DSS Medicaid Portal Webpage & Additional Resources

The DSS Medicaid Portal webpage can be accessed via the following URL: <https://dss.sd.gov/medicaid/portal.aspx>. The Medicaid Portal logo serves as the point of access for the Portal's Login page. All Portal screens will display the same logo for user's to click and be re-directed to the DSS Medicaid Portal webpage. This page will be updated periodically with User Documents, FAQs and Portal related announcements from the Medicaid Portal Team.



Figure 1: DSS Medicaid Portal Webpage – Portal Access Point & Reference Documents

User Roles & Accounts

The Medicaid Portal allows SD Medicaid Providers account oversight through the creation of two types of User Roles. The initial registration for a Provider Admin account should be submitted by the designated Point of Contact (POC) and should include each Billing NPI for which they need to oversee. This contact will assume the Provider Admin role, capable of setting up their own user account structure within the Portal for administration and access to the Portal's functionality. Only Provider Admin Roles have the ability to add a Provider User within their organization's Portal user account structure. The Medicaid Portal application supports two types of Provider account roles.

Provider Admin Role

Provider Admin accounts will be responsible for Medicaid Portal oversight and management of, all User Administrative functions within the Portal, for their Billing NPI(s) including: Adding, Updating and Approving/Rejecting users.

The Provider Admin will be granted all available Permissions by default, including Administration which includes the ability to:

- Add Users – Create additional Provider Admin and Provider User accounts for All, or any Combination of, Billing NPI(s) managed by that Admin
- Work Queue - Approve/Reject Registration requests in their "Work Queue" for User Registrations within their Billing NPI(s)
- Update – Admins can modify the other Provider Admin and Provider User accounts and available permissions, including: Add/Remove access to a user's assigned Billing NPI(s), Permissions Available, change user's status to Inactive or reactivate a user, Reset a user's password and also update a user's account Contact information details
- Users – View a list of the Active and Inactive, Provider Admin and Provider User accounts which they have created and/or approved within their Portal account

A Provider Admin will only have administrative oversight of an organization's users within the list of Billing NPIs their Portal account controls. Even if a Billing NPI falls under a Tax ID for a Provider, they will not have the ability to administer Portal accounts for that Billing NPI, unless it has been included in their Registration request. It is essential that Registration requests includes **each** Billing NPI for which they need administrative oversight of within the Portal. Once a registration has been approved by the Medicaid Portal Team, the Provider Admin user will ONLY have the ability to administer account permissions for their assigned Billing NPI(s). If additional Billing NPI(s) access is required after being approved, the user must submit a request via email to the Medicaid Portal Team at DSSOnlinePortal@state.sd.us, for approval.

Provider User Role

Provider Users have "read only" ability within the Portal and can only be added by their Provider Admin contact. The intention of this architecture is to leave Portal account user access at the discretion of the Providers. This ensures users are being granted account permissions by the users best suited to make those determinations within their organization.

The Provider User account structure and setup is differentiated by Permissions Available and by access limitations to the Servicing NPI level. A Provider User account can be restricted by Billing NPI and Servicing NPI. If a User should be able to view and print Remittance Advices for their Servicing NPI,

which provided those services under two of the organization's Billing NPIs, the Provider Admin can limit that User's account to both Billing NPIs for the one Servicing NPI. Provider User roles can access, view, save and print reports for whichever combination of Billing and Servicing NPIs that User's account profile has permissions to.

- Provider User accounts can only be created and updated by the Provider Admin
- Administration – No Administration abilities to view, add, update or modify other user accounts
- Reports – Can generate, retrieve, view, print and save Remittance Advice reports, but are limited by the combination of Billing NPI and Servicing NPI remits for which they have the ability to access.
 - Requests for access to additional Billing/Servicing NPI combinations must be directed to and approved by, their Admin.
 - Requests for additional Portal permissions must be directed to and approved by their Provider Admin.

New Registration

The Medicaid Portal registration process accepts registration requests for one or multiple Billing NPI(s) and is not limited to the number of Billing NPIs which can be requested at one time. The organization's account administrator will assume responsibility for the oversight and administration of all additional Portal user accounts within their Billing NPIs they control. Administration includes adding users within their Billing NPI(s) and receiving requests for Portal accounts from users within their Billing NPIs. They can delegate oversight to additional Provider Admins for one or more of their Billing NPIs to help establish the appropriate levels of hierarchical access and permissions to their organization's users.

In order to submit a New Registration form, users must complete all required fields, add at least one Billing NPI as "requested" and check the important message acknowledgment regarding paper remittance advices. A valid combination of the following three data elements are required in order for a Billing NPI to be requested. The unique combination of these three values is verified against our database for accuracy, before users can "ADD" a requested Billing NPI:

- The seven (7) digit SD MEDX ID – SD MEDX is the SD Medicaid Provider Enrollment system, for which your organization's Provider Enrollment Credentialing Specialist has login credentials.
 - If you do not know the SD MEDX ID for your Billing NPI(S), please contact your organization's Provider Enrollment Credentialing Specialist to request this information.
 - The enrollment specialist will be able to search for one or more of your organization's Tax ID's and provide you with a list of each unique SDMEDX ID & Billing NPI combination.
 - If the SDMEDX ID & Billing NPI combination is NOT entered correctly for each Billing NPI, the user will receive an error that "This combination is not valid."
- Nine (9) digit Tax ID - Federal Employer Tax ID number (FEIN or TIN) for which an organization is enrolled with SD Medicaid.
 - If you do not have an FEIN, you may be enrolled with SD Medicaid as a sole ownership. In such instances, your FEIN may be your Social Security Number (SSN).

- Ten (10) digit Billing NPI – Billing National Provider Identification number(s) enrolled with SD Medicaid.
 - If enrolled with SD Medicaid as a sole ownership, your “Billing” NPI may be your Type 1, Servicing NPI.

The screenshot shows the 'Online Portal' logo at the top left. Below it is a green header bar with the text 'New Registration for Provider Administration (you can request access to one or more Billing NPI's)'. A red asterisk icon with the text '* indicates required fields' is positioned above the form fields. The form is divided into two main sections. The left section contains fields for 'Contact First Name', 'Contact Last Name', 'Contact Phone' (with an 'Ext.' sub-field), 'Contact Email', 'Confirm Contact Email', 'Contact Address', 'State', 'City', and 'Zip'. The right section contains fields for 'SDMEDX ID', 'Tax Id', and 'Billing NPI' (with a '+ ADD' button). Below the 'Billing NPI' field is a section titled 'Billing NPI's that you are requesting access to:' which includes a search bar with the placeholder text 'Enter Billing NPI to search from the list below.' and a search icon. At the bottom of the form, there is a checkbox with the text 'IMPORTANT: Once you are registered within this Portal your organization will no longer receive paper remittance advices. Remittance advices will be accessible immediately upon logging in.' Below this checkbox are two buttons: 'Submit' and 'Cancel'. At the very bottom of the page, there is a copyright notice: '© 2016 South Dakota Department of Social Services. All Rights Reserved.' followed by a list of links: 'Home', 'State Home Page', 'Disclaimer', 'Accessibility', 'Privacy Policy', 'Contact Us', and 'HIPAA'. Below the links is the address '700 Governors Drive | Pierre, SD 57501' and the phone number '605.773.3495'.

Figure 2: Medicaid Portal New Registration Form

New Registration Contact form field information should be populated with the Requestor’s business contact information. The New Registration form Contact Email address entered will become the Requestor’s Username. If the system identifies that an account has already been requested, or approved for an email address, the Requestor will receive an error that the email already exists and will not be able to submit the New Registration form. If the Requestor does not receive a submission confirmation email at the Contact Email address listed in their registration form, they may have typed their email incorrectly. If this occurs, please send an email to DSSOnlinePortal@state.sd.us regarding the email address being entered incorrectly on the pending registration request.

The Contact form fields do have some built-in functionality in place that is important to note:

- Help Text - When populating the Contact details, users can hover their mouse pointer over the “?” icon to display help text. Help Text defines the expected value or input, for that field.
- Asterisk (*) – Each required field is indicated with an asterisk (*) symbol. Screens containing required input fields will also display an information message that “* indicates required fields”
- Contact Phone – This field is formatted to only accept numeric values and also to automatically populate () and – as the user types. Users will not be able to delete or modify the format in place for this field.
- Ext. – The extension field allows up to seven (7) numeric-only values. This is not a required field.
- Contact Email – The email address can only be validated for format accuracy. If users do not type in their email address correctly (i.e. misspell a word) in both email fields, they will only be

aware of the error, if they do not receive an email confirmation at the expected email address they entered, within a short timeframe of submitting their request.

- State, City & Zip – These fields are dynamic fields and require users to select them in the order which they are displayed on screen. Once user selects State, the City dropdown allows users to select the list of cities specific to that State. After selecting the appropriate City, the user can select the appropriate Zip code value. If the City/Zip dropdowns do not automatically populate after State is selected, the Portal may be querying the address database. Please wait a few additional seconds and try again if this occurs.
- SDMEDX ID, Tax ID & Billing NPI – These fields will only accept numeric values. If any combination of the three cannot be validated against the database and are incorrect, the user will receive “This combination is not valid” error, when attempting to click “ADD” button.
- Important Message Checkbox – This acknowledgment must be checked in order to submit a New Registration request. If the user clicks “Submit” before checking the acknowledgment box, they will receive an error and their form will not be submitted.

New Registration for Provider Administration (you can request access to one or more Billing NPI's)

★ indicates required fields

Contact First Name ★ Please enter Contact First Name Contact Last Name ★ Please enter Contact Last Name

(Ext Please enter a valid Contact Phone Number

Contact Email ★ Please enter a valid Contact Email

Confirm Contact Email ★ Confirm Contact Email

Contact Address ★ Contact Address is required

State ★

City ★ Please select a valid City

Zip ★ Please select a valid Zip

SDMEDX ID ★ SDMEDX Id is required

123 Tax Id is invalid

2345 Billing NPI is invalid

Billing NPI's that you are requesting access to:

Enter Billing NPI to search from the list below.

☒ **IMPORTANT:** Once you are registered within this Portal your organization will no longer receive paper remittance advices. Remittance advices will be accessible immediately upon logging in.

Figure 3: New Registration Screen Error Messages

After submitting a New Registration request, the Requestor will be directed back to the Login screen and receive a “Success” message notifying them that their request was submitted for approval. User will also receive a confirmation email at the email address listed in their New Registration form that their request was submitted for approval.

Figure 4: New Registration “Success” Message upon Submission

New Registration requests will be received by the Administrator in their “Work Queue” and will remain pending until Approved/Rejected. If there are any questions concerning the Registration request, the Requestor may be contacted directly by the Reviewer via phone or email. Incomplete or invalid registration forms will not be submitted for review. If the Reviewer cannot validate the form or confirm details in question, the Requestor will receive an email notification that their registration request has been Rejected.

Administration

Reports

Work Queue

+ Add User

Contact Email	Contact Last Name	Contact First Name	Submit Date/Time	Provider Name	Billing NPI	Tax Id	Action
PendingRegistration@WorkQueue.com	WorkQueue	ProviderAdmin	01/25/2017	Fairview Southdale Hospital	1770663031	410991680	Accept / Reject

<< < 1 > >> Go to page: 1 Row count: 10 Showing 1-1 of 1

Figure 5: Provider Admin Work Queue with Pending Registration Request

Once approved, the Requestor will receive an approval email confirmation with temporary login credentials and details. The initial login process must be completed within 3 days (72 hours) or the password will expire. If the request is rejected, the Requestor will receive a rejection email notification.

Login

The first time a user logs into the Medicaid Portal, they will need to login using the Temporary Password, they received in their Portal account approval email notification. The Username for Login will always be the user’s email address, for which they registered their Portal account. Temporary Passwords are only valid for 3 days (72 hours) after receipt of the approval confirmation email notification. If a user forgets or loses their password, they can select “Forgot Password” to complete the steps as outlined in the Forgot Password section.

Figure 6: Medicaid Portal Login Screen

When logging in for the first time, users will be prompted to enter their Login Username and temporary password. After successful login, users will be directed to the Change Password form where they will need to complete the following:

- Re-enter Temporary Password - The password received via email.
- Type in a New Password - Please note the State Password Security Standards, below.
- Retype New Password - The New Password entered and the Retype New Password to confirm. If the new password and re-typed password do not match, the user will receive an error.
- Select three Security Questions and Responses - These Security Questions and Responses will be used for “Forgot Password” functionality.
- Username - The Username field is grayed out on the “Change Password” form. The Contact Email Address submitted on the Registration form or when the user account was added, becomes the unique account Username.
 - Email addresses cannot be duplicated and users will not be able to have two Active accounts for the same Username.
 - If a User’s email address changes, their Portal Provider Admin will need to Update the user’s account to “Inactive” status and create a new Account for them under their new email address.

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700 Governors Drive | Pierre, SD 57501

605.773.3495

Figure 7: Change Password Screen

State Password Requirements & Security Standards

The following are State Standards for Passwords, including those used in the Portal. When considering your Portal password, please review and apply these standards to ensure compliance with State Security Standards:

- Must be changed every ninety days;
- Must be at least eight characters;
- Must contain at least three of the following four character groups:
 - English uppercase characters (A through Z);
 - English lowercase characters (a through z);
 - Numerals (0 through 9);
 - Non-alphabetic characters (!, \$, #, %)
- Must not be one of the six most recent passwords;
- Must not have been changed within the last seven days;
- Does not contain your account or full name that exceeds two consecutive characters.

User Role & Profile

Upon Login, users are directed to the Dashboard or “Welcome” page. Regardless of user role or type, the following User Role & Profile information can be found in the upper right-hand corner of the page:

1. User Role – “You are logged in as...” message will be displayed with Role that user’s account was created for. Providers will either be assigned a “Provider Admin” or “Provider User” Role.
2. User Guide & FAQs Links – These are linked user reference documents which are opened in a new browser tab, when clicked
3. User Profile Icon & First Name – These populate in the upper right hand corner next to a dropdown arrow, indicating a sub-menu. When users click the dropdown arrow, the sub-menu will expand to display additional actions available to their Portal account information and/or actions
 - a. My Profile – This is a sub-menu where users can review their contact details and available permissions
 - b. Change Password – This sub-menu allows users to change their passwords, if necessary
 - c. Logout – Will log the user out of the Medicaid Portal and direct them back to the Login page



Figure 8: User Role & Account Profile View

My Profile

When a user selects the My Profile option from their Account Profile sub-menu, they will be directed to their Portal account profile. This page displays their account contact information, Billing NPIs for which they have access to and their current Permissions Selected. The example below is the My Profile view

for a Provider Admin User. Any fields which are greyed out cannot be updated. Provider Admins will have all available Permissions Selected, by default. Provider Users will not have the ability to see or to have, Administration permissions, added to their Profile.

If any of the profile information which is locked from editing needs to be updated. The Administrator for that user's account will need to be notified of the requested changes. If the Provider Admin "master" account, which originally submitted the New Registration form for an organization's Billing NPIs, requires updates, the State Super Admin user will need to be notified of the requested changes. If you do not know who the Medicaid Portal account administrator is for your organization, please contact your supervisor or email DSSOnlinePortal@state.sd.us.

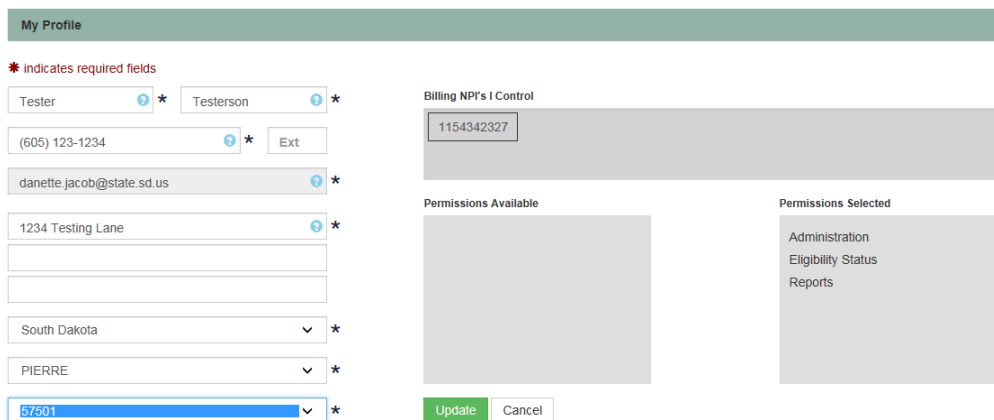


Figure 9: Provider Admin - My Profile screen

Change Password

Users can also select "Change Password" from their Profile sub-menu options. This will allow users to update their Portal login password. In this screen users will enter their current password, type in a new password, and then retype the new password for confirmation. The New Password and Retype New Password values must match. After completing the Change Password form and clicking "Submit" the user will receive an email notification concerning changes made to their account.

Logout

Users can select "Logout" from their Profile sub-menu options. When users select "Logout" from the sub-menu, they will be logged out of the Medicaid Portal and directed back to the Login screen.

Forgot Password

If a user loses or forgets their Portal login password, they can request a temporary login password and create a new password, using the Forgot Password functionality. The Portal will generate a temporary password and send it to the user's account email address. Once the user receives the email containing their temporary password, they simply have to login using their same username and the temporary password they received via email. This Temporary Password will only remain active for three days (72 hours). Upon logging in, they will be directed to the Change Password screen. The Temporary Password should be entered as their "Old Password." The new password selected by the user must adhere to the State Password Requirements, defined above.

The **Forgot Password** process flow is as follows:

1. Click “Forgot Password” on Login screen (*Figure 6*)
2. Enter your Username then Click “Submit”
3. Enter Responses to the Security Questions selected when completing first time Login process
4. Click “Submit”
5. A new Temporary Password will be sent to the user’s account email address

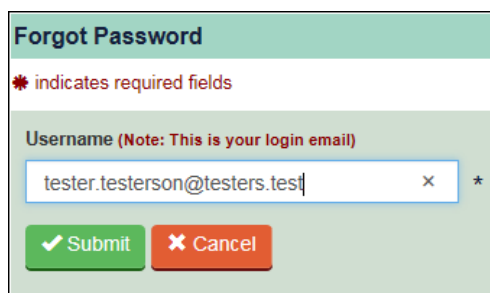


Figure 10: Forgot Password Username

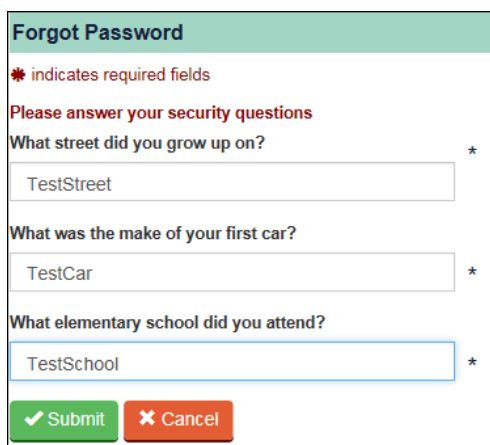


Figure 11: Forgot Password Security Question Responses


Medicaid Portal Logo & Footer Hyperlinks

Each screen of the Portal will display the Medicaid Portal logo in the upper right-hand corner of the screen. This logo is hyperlinked to the DSS Medicaid Portal Webpage. Each Portal page will also include the following hyperlinks to direct users to informational pages, when necessary. When these links are directed outside of the Portal application, users will see the external information opened in a browser window tab. This will allow users to easily navigate back to the Portal application from the external information content. The hyperlinks are directed as follows:

1. Medicaid Portal Logo – DSS Medicaid Portal webpage
2. Home – This link has two functionalities, depending upon the user’s Login status
 - a. If the user is not logged in, the “Home” link on the Login page will remain at Portal Login page
 - b. If the user is logged in, the “Home” link will direct users back to the Portal Dashboard page
3. State Home Page – The Official South Dakota State Government website
4. Disclaimer – South Dakota Medicaid Disclaimer and Limitation of Liability web address

5. Accessibility – South Dakota Medicaid Accessibility Policy web address
6. Privacy Policy – South Dakota Medicaid Privacy Policy
7. Contact Us – Opens blank email, addressed to the Medicaid Portal general email address
8. HIPAA – DSS Health Insurance Portability and Accountability Act





Welcome to the DSS Online Portal

Use a valid username and password to gain access to the portal

For assistance with username and password, contact your administrator.

For more help contact the State at DSSOnlinePortal@state.sd.us

LOGIN

(Note: This is your login email)

Login
[Register](#)
[Forgot Password](#)

Figure 12: Medicaid Portal Logo and Footer Hyperlinks are Displayed on each Portal Screen

Medicaid Portal Menus

The Portal currently has two Permissions Available options that users can be granted access to view and navigate. These Permissions will display as half-moon Menus along the top of a user's Portal account screen. Depending upon the User Role assigned when an account is created, the Menus available to an individual user account can vary. By default, the Provider Admin role has all available Permissions as demonstrated in Figure 4, below. These defaulted Permissions can only be modified or updated by the user approving the user's registration request, or creating the Provider Admin's account. The available Menus are: Administration and Reports. The Provider User role can only be given Permissions for Reports. A Provider User role's Permissions will be determined by their Provider Admin when creating or updating that user's account.



Figure 13: Portal Permissions Available are Displayed as Half-Moon Menus

Administration

The Medicaid Portal **Administration** Permissions are only available to Provider Admin User Roles. The Administration Menu includes a subset menu for performing additional administrative functions. The available sub-menu options are: User Maintenance, Work Queue and Message Log. The Provider Admin

role will have the ability to perform all Administration functionality by default. The Provider User role cannot be assigned Administration functionality.

Provider Admin User Type

The **Administration** Permission is granted to a Provider Admin user by default. Only the administrator which approved or created that Provider Admin's account can update or modify the Permissions Available to that Provider Admin user. Provider Admins are able to perform all administrative functions within the Portal and to navigate all Portal pages, menus and screens. After logging into the Portal, a Provider Admin will be at their Dashboard or "Welcome" page.



Figure 14: Provider Admin Dashboard or "Welcome" Page

User Maintenance

The User Maintenance menu is located in the **Administration** sub-menu. By navigating to Administration and clicking **User Maintenance**, the Provider Admin will be able to: Add User, view user list, search, filter, reset user list to default view and export their list of users. From this menu, the Provider Admin can also **Update** a user account by selecting "Update" in the **Action** column for that user. The default view for Users will populate with **Active** user accounts although the admin can select to view "All" or "Inactive" status users, from the **Status** dropdown filter, then click "Search" to view all active and inactive users. The **Export Users** functionality allows Provider Admins to export their user list to Excel. This export functionality will automatically export and open a list of users in Excel, for the admin to perform any additional user maintenance or necessary filtering.

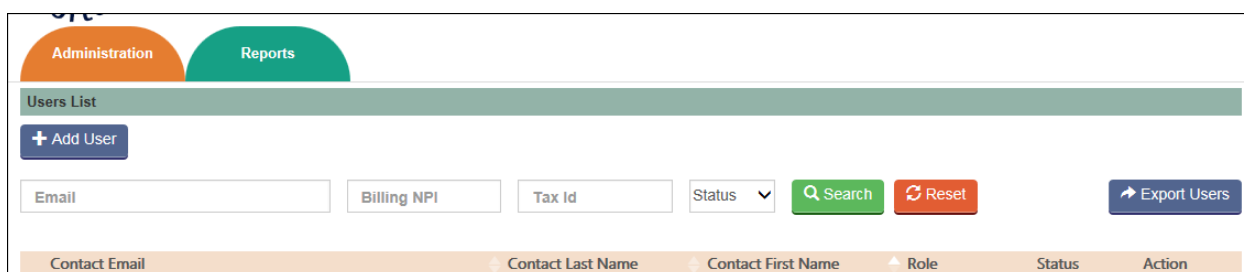


Figure 15: Users List Default View

The **Users** list will be displayed in a collapsed view, by default. When collapsed, the user list displays each user's Contact Email, Contact Last Name, Contact First Name, Role, Status and Update information in the collapsed view. When a user's account detail is expanded, the Provider Admin can also see the individual user's account access, including: Billing Provider Name, Billing NPI, Tax ID, Servicing Provider Name and Service NPI. To expand or collapse a user's account, click the '+' sign located to the left of the user's Contact Email. When expanded, the '+' sign becomes a '-' sign which can be clicked to collapse the user's account details.

In the expanded user detail view, the admin will be able to see the user's name and access details, differentiated by a different color scheme to indicate which specific user and access, the admin is viewing. If the admin wishes to update that user's access, they can click **Update** for the individual user's account, whether expanded or collapsed.

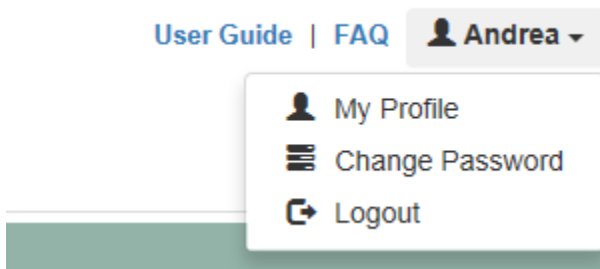
test.tester@testing.test	Tester	Test	Provider Admin	Active	Update
Test Tester has access to following NPI's					
Billing Provider Name	Billing NPI	Tax Id	Servicing Provider Name	Service NPI	
Avera Queen Of Peace	1699972422	460224604	Avera Queen Of Peace	1699972422	
<< < 1 > >> Go to page: 1 Row count: 10					Showing 1-1 of 1

Figure 15: Users List Displayed with Two Collapsed Users View (+) and One Expanded User View (-)

Add Users

Provider Admin users have the ability to add additional Provider Admin and Provider User types within their Medicaid Portal account structure for the appropriate access. It is recommended that the primary Provider Admin user create an additional Provider Admin user to assist with registration requests and Medicaid Portal account maintenance for their organization, in the event of their absence. The eventual additional of new functionality, addition of reports and other abilities, may also mean that the creation of admin users within various business lines of an organization (i.e. Managed Care, Health Home, Medicaid, etc.) to facilitate the appropriate addition of users which will require access and permissions for their relevant reports and information.

Provider Admins are able to "Add User" accounts for any of the Billing NPIs that their Portal account controls. To review a list of NPI's which a user controls or has access to; users can navigate to their "My Profile" screen. This option is available within all account types and can be located by, navigating to your Account Profile, clicking the down arrow, and then selecting My Profile from the sub-menu. The My Profile screen will display a listbox populated with the Billing NPIs available to a Provider Admin account profile. The Billing NPIs listed for a Provider Admin account are those that Admin user account has permissions to add, update and approve/reject, Provider Admin or Provider User accounts for.



Add Provider Admin User

The Provider Admin can create accounts for multiple Provider Admins to aide in establishing and delegating the desired account hierarchy within an organization. These additional Admin users will have the ability to create and update and manage users within the Billing NPI(s) assigned to their account. These additional administrative users will also receive email notifications, generated as a result of New Registration requests from additional Provider Admin users within their Billing NPIs for review and approval/rejection.

The following process flow is for a Provider Admin to Add a Provider Admin user account:

1. Hover the mouse over **Administration**
2. Select **User Maintenance** from the sub-menu
3. Select the **Add User** button

The screenshot shows the 'Users List' interface. At the top, there are tabs for 'Administration' and 'Reports'. Below the tabs, there is a 'Users List' section with an 'Add User' button. Below the button, there are input fields for 'Email', 'Billing NPI', 'Tax ID', and a 'Status' dropdown. There are also 'Search' and 'Reset' buttons. At the bottom, there is a table with columns: 'Contact Email', 'Contact Last Name', 'Contact First Name', 'Role', 'Status', and 'Action'.

4. Select "Provider Admin" from the **User Type** dropdown list
5. Enter Contact information into required Add Provider Admin contact information fields

The screenshot shows the 'Add Provider Admin' form. It has several input fields with asterisks indicating required fields: 'Tester' (with a help icon), 'Testing' (with a help icon), '(605) 235-6478' (with a help icon and an 'Ext' field), 'Test.Tester@tester.tests' (with a help icon), '1234 Testing Lane' (with a help icon), 'South Dakota' (dropdown), 'PIERRE' (dropdown), and '57501' (dropdown). On the right, there is a 'Please select User Type to get started' dropdown with 'Provider Admin' selected. Below this, there is a message: 'Please fill up the contact details to proceed to next screen'. At the bottom right, there are 'Next' and 'Cancel' buttons. A red asterisk indicates required fields.

Figure 18: Completed Add Provider Admin Screen 1

6. Click **Next** to proceed to the second **Add Provider Admin** screen
7. Provider Admin accounts must have at least one Billing NPI populated in the **Billing NPI's that you are granting access to** listbox (Figure 19):
 - a. Select the Billing NPI value, or list of Billing NPI values for the user's account access, displayed in the Billing NPI list
 1. Users can select Billing NPIs one at a time by checking individual Billing NPI boxes
 2. Select multiple Billing NPIs by checking **Select All** checkbox above the **Billing NPI** list
 3. Search for a Billing NPI by entering it into the search box and clicking the search icon to search for and locate an individual NPI in a list (Figure 19)
 - b. Click **Add** to populate Billing NPI(s) in the **Billing NPI's that you are granting access to** listbox
 1. Add one Billing NPI at a time, or select multiple Billing NPIs to add at once
 2. The **Add** button will only populate a Billing NPI into the user's BNPI access list, if the Billing NPI value has **not** already been added.

- i. If the user selects a Billing NPI and clicks **Add**, the Billing NPI will only be added into the access requested listbox, if it has not already been added. This is to prevent duplicates
- ii. If a Billing NPI is added in error, the user can click the red 'x' next to that Billing NPI in the **Billing NPI's that you are granting access to** listbox to remove it
- iii. Users will be able to populate a value into the "Enter Billing NPI to search from the list below" search box, to locate a Billing NPI from a large list of assigned Billing NPIs
- iv. When located, the Billing NPI value will be displayed in red

Figure 19: Add User Screen 2 – Search Results are Indicated in Red

Figure 20: Default Permissions Selected list for a Provider Admin

8. The user will receive confirmation that the Billing NPI has been added successfully. Click "OK" to proceed
9. After selecting the desired Billing NPI(s) for that user's account Billing NPI access, the final step is to review the user's **Permissions Selected**
 - a. Provider Admin users will be assigned all available **Permissions Selected**, by default.
 1. To modify a user's **Permissions Selected** options, click on the Permission name
 - i. If selected, a Permission will be highlighted in orange for the user
 2. To remove the selected Permission, click the left arrow
 3. The **Permission Available** box will contain the removed Permission

Figure 21: Add Provider Admin User Screen 2 – Defaulted Permissions

10. Click green **Add** button between the “Back” and “Cancel” buttons
 - a. User will receive a popup window notification, prompting them to confirm they wish to proceed
 - b. By clicking “Ok” the Add User form will be submitted
 - c. By clicking “Cancel” the Add User form will not be submitted, allowing the user to make changes prior to submitting the form
11. The newly added Provider Admin user account will now populate into the **Users** list

Add Provider User

The Provider Admin user type is the only user type which can create a Provider User account. The main differentiation between adding a Provider User and Provider Admin is the functionality to assign user access and permissions, at the Servicing NPI level. The Provider User’s access can be restricted by the Servicing NPI(s) associated with a single Billing NPI that they have the ability to access. A Provider Admin user has all Servicing NPI(s) associated with all Billing NPI(s) they control, by default. The Provider User account permissions will not contain Administration. This user type will not have the ability to perform user maintenance or other administrative functions, in the Portal. This user type should be considered “read only” although they will have access to generate, view, save and print Reports as well as the future capabilities of Eligibility Status Inquiries, if granted by their Provider Admin.

The following process flow is for a Provider Admin to **Add Provider User** account:

1. Click **Administration**
2. Select **Add User** sub-menu option
3. Select “Provider User” from the **User Type** dropdown list
4. Enter Contact information into required Add Provider User contact information fields

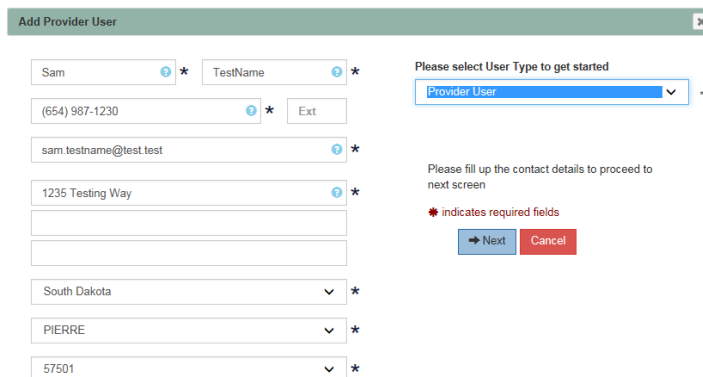


Figure 22: Add Provider User Screen 1 – User’s Contact Information

5. Click **Next** to proceed to the second **Add Provider User** screen
6. Provider User accounts must have at least one **Billing NPI-Servicing NPI** combination populated in the **Billing NPI’s that you are granting access to** listbox (Figure 23):
 - a. Select the Billing NPI value, or list of Billing NPI values for the user’s account access, displayed in the Billing NPI list
 1. Users can select Billing NPIs one at a time by checking individual Billing NPI boxes
 2. Select multiple Billing NPIs by checking **Select All** checkbox above the **Billing NPI** list

- i. If multiple Billing NPI values are selected, the Billing NPI – Servicing NPI listbox will display ALL combinations of Servicing NPI(s) associated with EACH Billing NPI selected
3. Search for a Billing NPI by entering it into the search box and clicking the search icon to search for and locate an individual NPI in a list (*Figure 23*)
- b. After selecting the Billing NPI value, the **Billing NPI – Servicing NPI** box will update with all possible combinations of Servicing NPI(s) associated with the selected Billing NPI(s)
 1. Select one **Billing NPI – Servicing NPI** combination checkbox to add one at a time
 2. Select multiple **Billing NPI – Servicing NPI** checkboxes or **Select All** checkbox above
 3. Search for a particular Servicing NPI by entering it into the search box and clicking the search icon to locate all occurrences of that Servicing NPI in the populated list (*Figure 23*)
- c. Click **Add** to populate Billing NPI(s) in the **Billing NPI's that you are granting access to** listbox
 1. Add one Billing NPI at a time, or select multiple Billing NPIs to add at once
 2. The **Add** button will only populate a Billing NPI into the user's BNPI access list, if the Billing NPI value has **not** already been added.
 - i. If the user selects a Billing NPI and clicks **Add**, the Billing NPI will only be added into the access requested listbox, if it has not already been added. This is to prevent duplicates
 - ii. If a Billing NPI is added in error, the user can click the red 'x' next to that Billing NPI in the **Billing NPI's that you are granting access to** listbox to remove it
 - iii. Users will be able to populate a value into the "Enter Billing NPI to search from the list below" search box, to locate a Billing NPI from a large list of assigned Billing NPIs
 - iv. When located, a Billing NPI, Billing NPI – Servicing NPI, Billing NPI access value will be displayed in red

Figure 23: Billing NPI, Billing NPI – Servicing NPI, Billing/Servicing Access Search Results

7. The user will receive confirmation that the Billing NPI has been added successfully. Click "OK" to proceed

Figure 24: Adding a Billing NPI – Servicing NPI to Access List for Provider User

8. After selecting and adding all required **Billing NPI(s) – Servicing NPI(s)** for that user's account access, the final step is to review the user's **Permissions Selected**
 - a. Provider Users can only be assigned **Reports** options in the **Permissions Selected** list
 - b. To remove a **Permission Selected** or add a **Permission Available**
 1. Click on the Permission name to select it
 - i. A "selected" permission will be highlighted to indicated it has been selected
 2. Click the left arrow button to move a selected Permission into the **Permissions Available** list
 3. Click the right arrow to move a selected Permission into the **Permissions Selected** list
 4. Users can select multiple checkboxes to move multiple Permissions, simultaneously

Figure 25.1: Selecting Multiple Permissions Checkboxes

9. Click green **Add** button between the "Back" and "Cancel" buttons
 - a. User will receive a popup window notification, prompting them to confirm they wish to proceed
 - b. By clicking "Ok" the Add User form will be submitted
 - c. By clicking "Cancel" the Add User form will not be submitted, allowing the user to make changes prior to submitting the form
10. The newly added Provider User account will now populate into the **Users** list

Contact Email	Contact Last Name	Contact First Name	Role	Status	Action
+ testster testerson@testers.test	Testerson	Tester	Provider User	Active	Update

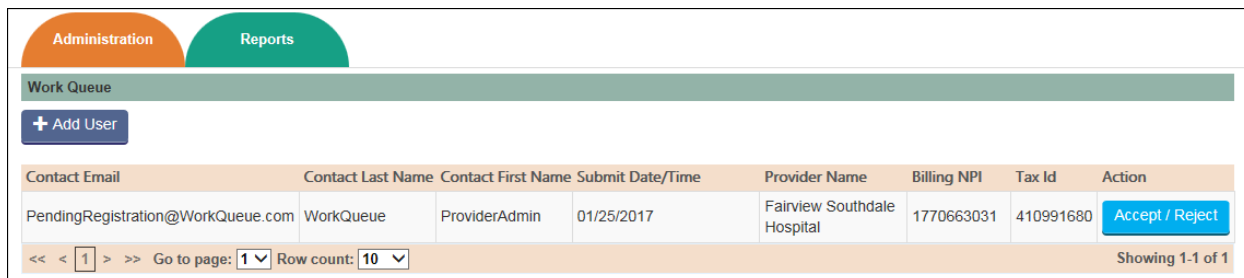
Figure 27: Added Provider User Account Displays in Users List

Work Queue

Provider Admin users must check their Work Queue regularly for pending Registration requests. If a Provider Admin has a pending request in their Work Queue that has not been approved or rejected within three days of the user submitting their Registration form, the Provider Admin user will receive an email notification regarding the awaiting request. Provider Admin users will only receive a Registration Request in their Work Queue when the Requestor has included the Billing NPI(s) which are administered and controlled by their Provider Admin account access. If the Requestor submits a request that includes more Billing NPIs or a combination of Billing NPIs for which the Provider Admin does not already administer access to, the Registration Request will not go into that Provider Admin's Work Queue. If the Requestor submits a request for access to one or more of the Billing NPIs that the Provider Admin currently administers access to, that request will be sent to the Provider Admin's Work Queue.

Accept/Reject Provider Admin Registration Request

New Registration requests are submitted to the Provider Admin user's **Work Queue** for review. This Provider Admin user and any additional Provider Admin users, for the requested Billing NPI access, will be able to approve or reject the request. Only a Provider Admin can submit a New Registration request. If a user submits a registration request to the Provider Admin, the admin will not have the ability to change the user type in the submitted request, to **Provider User**. If the user should not be granted administrative permissions, the Provider Admin should Reject the registration request and add the user account, manually.



Contact Email	Contact Last Name	Contact First Name	Submit Date/Time	Provider Name	Billing NPI	Tax Id	Action
PendingRegistration@WorkQueue.com	WorkQueue	ProviderAdmin	01/25/2017	Fairview Southdale Hospital	1770663031	410991680	Accept / Reject

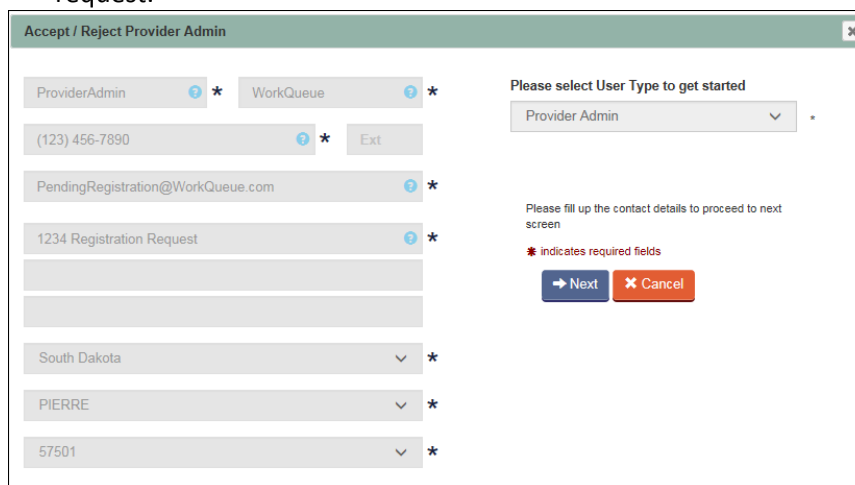
Navigation: << < 1 > >> Go to page: 1 Row count: 10 Showing 1-1 of 1

Figure 28: Work Queue with Pending Registration Request for Review

Provider Admins will receive all registration requests for any Billing NPIs they control, in their **Work Queue**. The admin must click **Accept/Reject** in the **Action** column to open that user's registration request. The **Accept/Reject** registration request window will then open and display the user's contact information in the first Accept/Reject screen.

To **Accept/Reject** a User's Registration Request:

1. In the **Work Queue**, click "Accept/Reject" from the **Action** column
2. The Accept/Reject Provider Admin screen will open to the user's Contact form details
 - a. The Provider Admin will not be able to update or modify the contact details within a registration request
 1. Once submitted, the Contact form field details cannot be modified
 2. If the user did not complete the form appropriately, the Admin should reject the request.



Accept / Reject Provider Admin

ProviderAdmin * WorkQueue *

(123) 456-7890 * Ext *

PendingRegistration@WorkQueue.com *

1234 Registration Request *

South Dakota *

PIERRE *

57501 *

Please select User Type to get started
Provider Admin *

Please fill up the contact details to proceed to next screen

* indicates required fields

Next Cancel

Figure 29: Accept/Reject Provider Admin Screen 1 – User Contact Details

3. Click **Next** to proceed to the second **Accept/Reject Provider Admin** screen
4. The Provider Admin should review the user's requested Billing NPI access
 - a. The Provider Admin should confirm that the Billing NPIs being granted to that user are legitimate and that there are no obvious Billing NPIs omitted from their request, in error
5. Confirm that the user should have all listed Permissions Selected values and remove any unnecessary Permissions (if any)
 - a. To remove a permission, click on a Permission to select it
 - b. Click the left arrow to move it into the **Permissions Available** list
6. Click **Accept** to Approve the user's registration request or
7. Click **Reject** to Deny the user's registration request.
8. User must click "OK" or "Cancel" on the confirmation to proceed message window
 - a. Clicking "Cancel" will return the user back to the Accept/Reject screen to make additional changes if necessary
 - b. Clicking "OK" will proceed with the approval or rejection email generation process
9. Approved users will be added into the Provider Admin's **Users** list

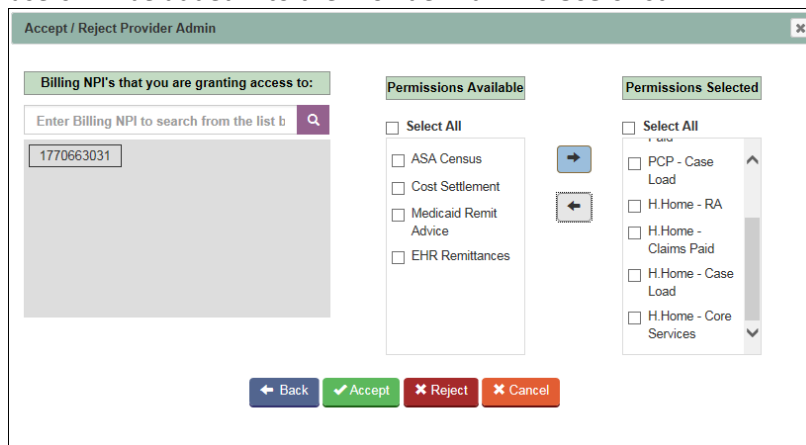


Figure 30: Accept/Reject Provider Admin Screen 2 – User's Request Access Details & Permissions

Update Provider Admin

An organization's Provider Admin users have the ability to update User profile information, including changing a user's contact information, resetting their password, inactivating a user, adding/removing Billing NPI access and adding/removing Permissions. To perform an Update, the administrator must navigate to their Users list. Within the list of Users, the administrator will then need to select Update from the Action column to make the necessary modifications to the user's existing account profile.

Users					
<div> Users Add User Work Queue </div> <div> <input type="text" value="Email"/> <input type="text" value="Billing NPI"/> <input type="text" value="Tax Id"/> <input type="text" value="Status"/> <input type="button" value="Search"/> <input type="button" value="Reset"/> <input type="button" value="Export Users"/> </div>					
Contact Email	Contact Last Name	Contact First Name	Role	Status	Action
+ sam.test@testing.test	Tester	Sam	Provider Admin	Active	Update
+ tester.testerson@testers.test	Testerson	Tester	Provider User	Active	Update
+ tester.testname@tests.test	TestName	Tester	Provider Admin	Active	Update
+ atestertests@testing.tests	Tester	Testing	Provider Admin	Active	Update
<div> << < 1 > >> Go to page: <input type="text" value="1"/> Row count: <input type="text" value="10"/> </div> <div>Showing 1 of 4</div>					

Figure 31: Users List with Available Update Action Button

To **Update Provider Admin** user account details:

1. Click **Update** from the **Action** column, for the user which is being modified
2. The first **Update Provider Admin** screen will be displayed, allowing the administrator to make necessary changes to the user's contact information
 - a. The user's Email field cannot be updated. If a user's email address changes, the administrator must first Inactivate that user's account and create a new account
 - b. If the user is being made "InActive" the administrator must click the "InActive" checkbox and click Next
 1. Click **Update** button in second Update Provider Admin screen
 2. Click "OK" on the prompt to proceed with update to submit the changes
 3. Click "Cancel" on the prompt to proceed with update to cancel the changes and return to the Update Provider Admin screen
 - c. To perform a "Reset Password" the administrator must click "RESET PASSWORD" then
 1. Click "OK" to confirm the process to reset the user's password
 2. Click "Cancel" to return to **Update Provider Admin** screen, cancelling the password reset

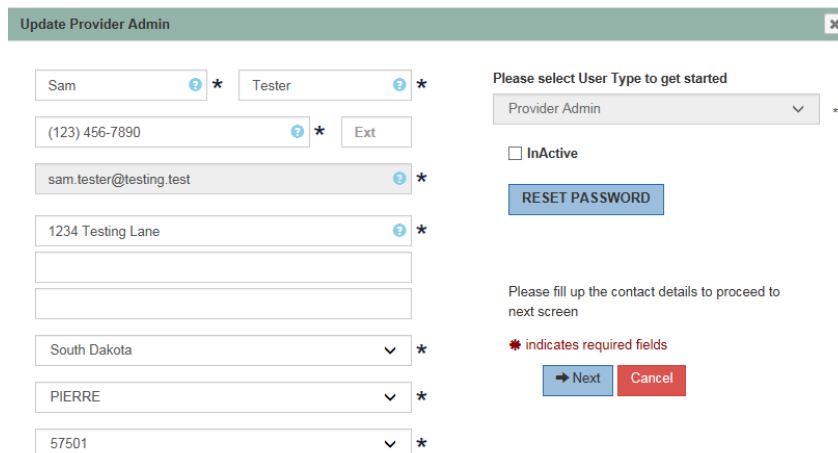


Figure 32: Update Provider Admin Screen 1 – Contact Information, InActive Checkbox, Reset Password Button

3. Click **Next** to proceed to the second Update Provider Admin screen
4. Perform any necessary updates to the user's Billing NPI access
 - a. To remove a Billing NPI, click the red 'x' for the Billing NPI populated in the Billing NPI granted access list
 - b. To add a Billing NPI to the user's existing permissions, perform the Add Billing NPI steps as defined in the Add Provider Admin screen 2 steps.
5. Perform any necessary updates to the user's Permissions by selecting and moving the desired permissions into the appropriate list
 - a. Permissions **NOT** assigned to a user profile will be displayed in the **Permissions Available** list
 - b. Permissions currently assigned to a user profile will be displayed in the **Permissions Selected** list
6. Click the **Update** button to complete and save the changes
 - a. Click "OK" to confirm you wish to proceed with making the updates to this user's account

- b. Click “Cancel” to return back to the Update Provider Admin screen and made additional changes
7. After performing updates to a user’s account, the changes to their account will be available for review in the user’s account details in their **My Profile** sub-menu

Figure 33: Updating Provider Admin – Added a Billing NPI to User’s Billing NPI Access

Figure 34: Updating Provider Admin – Removed Eligibility Status from User’s Permissions

Update Provider User

The process to update a Provider User account will be similar to the Update Provider Admin process, with the exception of choosing to modify that user’s Billing NPI – Servicing NPI account access and the inability to add administrative Permissions to their account. In the Update Provider User screen one, the administrator will be able to perform the same updates to a Provider User’s contact details, inactivate their account and reset their password as described in the Update Provider Admin process above.

To **Update Provider User** account details:

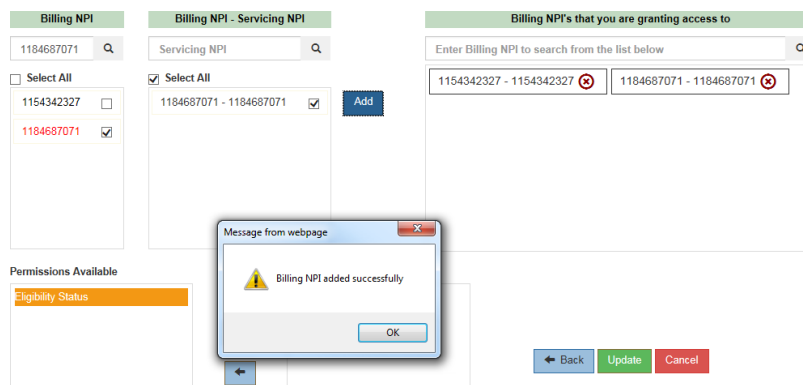
1. Locate the user’s account in your **Users** list and click **Update**
2. Perform all necessary updates to the user’s contact information

- a. Click **InActive** checkbox to inactivate the user's account, then click Next to complete the process of inactivating a user
- b. Click **RESET PASSWORD** button to create a new system generated, temporary password to be sent to the user's email address

Figure 35: Update Provider User Screen 1 – Matches Update Provider Admin Screen 1 Functionality

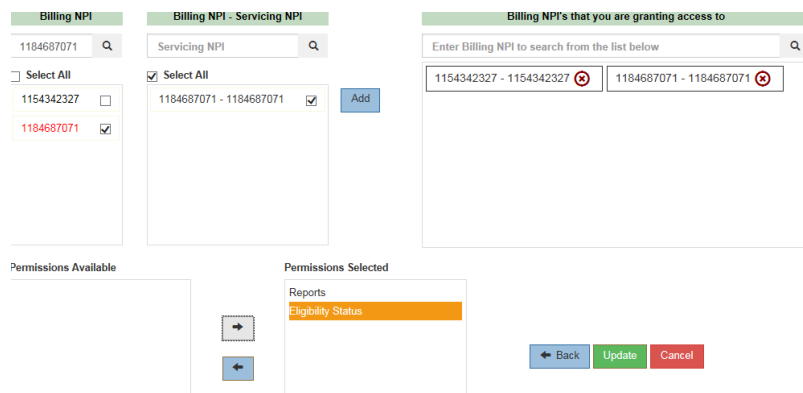
3. Click **Next** to proceed to second Update Provider User screen
4. Perform any necessary updates to the user's **Billing NPI – Servicing NPI** access
 - a. To remove a Billing NPI – Servicing NPI combination, click the red 'x' next to that value in the Billing NPI granted access to list
 - b. To add a Billing NPI – Servicing NPI combination to the user's existing access, perform the Add Billing NPI – Servicing NPI steps as defined in the **Add Provider User** screen 2 steps.
5. Perform any necessary updates to the user's Permissions by selecting and moving the desired permissions into the appropriate list
 - a. Permissions **NOT** assigned to a user profile will be displayed in the **Permissions Available** list
 - b. Permissions currently assigned to a user profile will be displayed in the **Permissions Selected** list
6. Click the **Update** button to complete and save the changes
 - a. Click "OK" to confirm you wish to proceed with making the updates to this user's account
 - b. Click "Cancel" to return back to the Update Provider Admin screen and made additional changes
7. After performing updates to a user's account, the changes to their account will be available for review in the user's account details in their **My Profile** sub-menu

Figure 36: Update Provider User Screen 2 – Before Updating User's Account Access & Permissions



The screenshot shows the 'Update Provider User' form. It has three main sections: 'Billing NPI', 'Billing NPI - Servicing NPI', and 'Billing NPI's that you are granting access to'. The 'Billing NPI' section has a search bar and a list of NPIs with checkboxes. The 'Billing NPI - Servicing NPI' section has a search bar and a list of NPIs with checkboxes. The 'Billing NPI's that you are granting access to' section has a search bar and a list of NPIs with checkboxes. A modal message box is displayed in the center, stating 'Billing NPI added successfully' with an 'OK' button.

Figure 37: Update Provider User – Added a BNPI/SNPI to User's BNPI/SNPI Access



The screenshot shows the 'Update Provider User' form. It has three main sections: 'Billing NPI', 'Billing NPI - Servicing NPI', and 'Billing NPI's that you are granting access to'. The 'Permissions Available' section has a list of permissions with checkboxes. The 'Permissions Selected' section has a list of permissions with checkboxes. The 'Eligibility Status' permission is selected in the 'Permissions Selected' section.

Figure 38: Update Provider User – Added Eligibility Status to User's Permissions Selected

Inactivating a User Account & Resetting User Password

If an Admin or User loses their password, the **Forgot Password** link on the **Login** page can help the user to obtain a new temporary password via email. If the user cannot remember their security question responses, has not logged into their Portal account for more than 90 days, or for some other reason is unable to complete the **Forgot Password** process, their Portal administrator can log into the Portal and reset the user's password, as noted in the above **Update Provider Admin** and **Update Provider User** processes.

After the Portal administrator has completed the **Reset Password** process, the user will be sent a new Temporary Password via the designated email address which is also their Portal Username for login. This Temporary Password will expire 3 days (72 hours) after receipt of the email. The user must login and complete the process to select a new password, prior to the temporary password expiration timeframe. If the user does not complete this login process to select a new password, they must have their password reset again by their Portal administrator.

Once a user's account is made Inactive, that user will be unable to login and access the Portal. Only a Provider Admin can log into the Portal and update the user's account as Active. This process can be done in the Update process.

Reports

The Medicaid Portal was designed to allow SD Medicaid Providers access to their reports at their discretion, electronically. This feature also allows them to determine the access needed by their billing and other facility staff to reports by type of report and to the specificity of individual providers to which those users require access. This creates a layer of security in protecting PHI in adherence with HIPAA by giving our providers the autonomy to determine what access is needed, by whom, which adheres to their internal organization's business structure and operational policy.

Medicaid Remittance Advice

The Medicaid Portal allows South Dakota Medicaid Providers the ability to retrieve up to 52 weeks of remittance advices, electronically. The ability to view, save and print remittance advices for a particular Billing NPI or Billing/Service NPI combination is determined by the user's Portal account profile and available access. If a user does not have the ability to retrieve remittance advice reports for a specific Billing/Service NPI combination, they must send a request to their Portal administrator to have that Billing/Service NPI combination added into their account access.

There are two options for how to view your remittance advices in the **Reports** menu:

1. Login to the Portal and click on Medicaid Remittance Advice from the **Reports** sub-menu
2. Select the **From** and **To** date span for which you'd like to view Remittance Advices for
 - a. The date span cannot exceed 90 days
 - b. The remittance advices will only be available for the most current 52 weeks prior to today's date
 1. The full 52 week history of Medicaid Remittance Advice reports will be available
 2. Only 90 days of Remittance Advices can be viewed at one time
 3. If the user attempts to enter an invalid date range, they will receive an error
3. There are two radio buttons for you to choose between, which will determine the Medicaid Remittance Advice report format:
 - a. **Combined Remittance by BNPI** – This option will generate one **combined** remittance advice for a Billing NPI and all Service NPIs associated with that Billing NPI, into one report for a remittance date
 1. To generate **Combined Remittances by Billing NPI** for a date span, the user must start by entering the **From** and **To** dates being searched
 2. Enter a Billing NPI number into the **Billing NPI** field
 3. Click **Create Report** button
 4. The screen will refresh and display a single Remittance Advice for that Billing NPI, that was created within your **From** and **To** date span
 5. Click **View** hyperlink for the remittance date you wish to view
 - i. A new browser window should open and the Remittance Advice for that date will be displayed in PDF format.
 - ii. On the report browser window users can View, Save, and Print the Remittance Advice report at their discretion
 - iii. Users can click on multiple View links to open multiple Remittance Advice reports in their own windows
 - iv. Users can close out of the Remittance Advice report windows without closing out of the Portal because it will be in its own browser window

- b. **Separate Remittances by BNPI/SNPI** – This option allows you to select Remittance Advice reports you wish to view from a list of Servicing NPIs associated with a Billing NPI, during the selected **From** and **To** date span. In this option, the Remit generated will only include a **single** Servicing NPI for a remittance date
- 1.If you select this option, enter the Billing NPI value into the **Billing NPI** field
 - 2.The **Servicing NPI** listbox will now appear with all Servicing NPIs associated to the Billing NPI
 - 3.Select the complete list by checking “Select All”; or check individual SNPI boxes to view specific SNPIs (In the example below, only a few SNPIs were selected)
 - 4.Click **Create Report** button
 - 5.The screen will refresh and display individual Remittance Advices for a Billing/Servicing NPI, created within the selected **From** and **To** date span.
 - 6.Click **View** hyperlink for a remittance date and Servicing NPI you wish to review
 - i. A new browser window should open and the Remittance Advice for that date and Servicing NPI will be displayed in PDF format
 - ii. On the report browser window users can View, Save, and Print the Remittance Advice
 - iii. Users can click on multiple View links to open multiple Remittance Advice reports in their own windows
 - iv. Users can close out of the Remittance Advice report windows without closing out of the Portal because it will be in its own browser window

Medicaid Remit Advice

Only 90 days of reports can be viewed at one time. Only 52 weeks of previous reports from today's date can be searched.

Please select whether you want to view all servicing NPI's in one file or individual files.

☒ Combined Remittance by BNPI
☐ Separate Remittances by BNPI / SNPI

Enter a date range (MM/DD/YYYY) to view your organization's information.

From: 12/01/2016 To: 1/25/2017

Lookup Billing NPI: 1326070814 Selected: 1326070814

Create Report

RA Date	Billing NPI	Billing Provider Name	Servicing NPI	Servicing Provider Name	Action
12/12/2016	1326070814	Community Health Clinic	1326070814	Community Health Clinic	View

<< 1 >> Go to page: 1 Row count: 10 Showing 1-1 of 1

Figure 43: Combined Remittance by Billing NPI Report View

Medicaid Remit Advice

Only 90 days of reports can be viewed at one time. Only 52 weeks of previous reports from today's date can be searched.

Please select whether you want to view all servicing NPI's in one file or individual files.

☐ Combined Remittance by BNPI
☒ Separate Remittances by BNPI / SNPI

Enter a date range (MM/DD/YYYY) to view your organization's information.

From: 12/01/2016 To: 1/25/2017

Lookup Billing NPI: 1699972422 Selected: 1699972422

Servicing NPI: 1134408578, 1508870619, 1639590219, 1699972422, 1801014956, 1942311584

Create Report

RA Date	Billing NPI	Billing Provider Name	Servicing NPI	Servicing Provider Name	Action
12/12/2016	1699972422	Avera Medical Group Orthopedics & Sports Medicine	1134408578	Vegehaupt, Brandon	View
12/12/2016	1699972422	Avera Medical Group Orthopedics & Sports Medicine	1639590219	Abbey, Benjamin	View

<< 1 >> Go to page: 1 Row count: 10 Showing 1-2 of 2

Figure 44: Separate Remittances by Billing NPI/Servicing NPI Report View

Medicaid Negative Balance Report

The Medicaid Portal allows South Dakota Medicaid Providers the ability to retrieve up to 24 months of previous Negative Balance reports from the current date.

The ability to view, save and print Negative Balance Report for a particular Billing NPI or Billing/Servicing NPI combination is determined by the user's Portal account profile and available access. If a user does not have the ability to retrieve Negative Balance reports for a specific Billing/Servicing NPI combination, they must send a request to their Portal administrator to have that Billing/Servicing NPI combination added into their account access.

There are two options for how to view your Negative Balance in the **Reports** menu:

1. Login to the Portal and click on Negative Balance Report from the **Reports** sub-menu
2. Select the **From** and **To** date span for which you'd like to view Negative Balance for
 - a. The date span cannot exceed 90 days
 - b. The Negative Balance report will only be available for the most current 24 months prior to today's date
 1. The full 24 months history of Negative Balance reports will be available
 2. Only 90 days of Negative Balance can be viewed at one time
 3. If the user attempts to enter an invalid date range, they will receive an error.
3. There are two radio buttons for you to choose between, which will determine the Negative Balance report format:
 - a. **Combined Negative Balance by BNPI** – This option will generate one **combined** Negative Balance for a Billing NPI and all Servicing NPIs associated with that Billing NPI, into one report for a date range.
 1. To generate **Combined Negative Balance report by Billing NPI** for a date span, the user must start by entering the **From** and **To** dates being searched
 2. Select the Billing NPI number from the list box.
 3. Click **Create Report** button
 4. The screen will refresh and display a single Negative Balance for that Billing NPI, that was created within your **From** and **To** date span
 5. Click **View** hyperlink for the Negative Balance report you wish to view
 - i. A new browser window should open and the Negative Balance for that date will be displayed in PDF format.
 - ii. On the report browser window users can View, Save, and Print the Negative Balance report at their discretion
 - iii. Users can click on multiple View links to open multiple Negative Balance reports in their own windows
 - iv. Users can close out of the Negative Balance report windows without closing out of the Portal because it will be in its own browser window.
 - b. **Separate Negative Balance by BNPI/SNPI** – This option allows you to select Negative Balance reports you wish to view from a list of Servicing NPIs associated with a Billing NPI, during the selected **From** and **To** date span. In this option, the Negative Balance generated will only include a **single** Servicing NPI for a selected date

1. If you select this option, select the Billing NPI value into the **Billing NPI** field
2. The **Servicing NPI** list box will now appear with all Servicing NPIs associated to the Billing NPI
3. Select the complete list by checking "Select All"; or check individual SNPI boxes to view specific SNPIs (In the example below, only a few SNPIs were selected)
4. Click **Create Report** button
5. The screen will refresh and display individual Negative Balance for a Billing/Servicing NPI, created within the selected **From** and **To** date span
6. Click **View** hyperlink for a Negative Balance report and Servicing NPI you wish to review
 - i. A new browser window should open and the Negative Balance for that date and Servicing NPI will be displayed in PDF format
 - ii. On the report browser window users can View, Save, and Print the Negative Balance
 - iii. Users can click on multiple View links to open multiple Negative Balance reports in their own windows
 - iv. Users can close out of the Negative Balance report windows without closing out of the Portal because it will be in its own browser window

Negative Balance Report

Please select whether you want to view servicing NPI's in one file or individual files.

☐ Combined Negative Balance Report by BNPI
☐ Separate Negative Balance by BNPI / SNPI

Enter a date range (MM/DD/YYYY) to view your organization's information

From: 05/01/2018 To: 05/31/2018

Only 24 months of previous reports from today's date can be searched
Only 90 days of reports can be viewed at one time

[Create Report](#)

Billing NPI

Billing NPI:

☐ Select All

☒ 1000000000
☐ 1000000001
☐ 1000000002
☐ 1000000003
☒ 1000000004
☐ 1000000005

Negative Balance Reports from 05/01/2018 till 05/31/2018

RA Date	Billing NPI	Billing Provider Name	Servicing NPI	Servicing Provider Name	Action
05/17/2018	1000000004	Spectra Laboratories Inc	1000000004	Spectra Laboratories Inc	View
05/17/2018	1000000004	Consultants, Ltd	1000000004	Consultants, Ltd	View
05/24/2018	1000000004	Consultants, Ltd	1000000004	Consultants, Ltd	View

<< < 1 > >> Go to page: 1 Row count: 10 Showing 1-3 of 3

Figure 45: Combined Negative Balance by Billing NPI Report View

Negative Balance Report

Please select whether you want to view servicing NPI's in one file or individual files.

☐ Combined Negative Balance Report by BNPI
☒ Separate Negative Balance by BNPI / SNPI

Enter a date range (MM/DD/YYYY) to view your organization's information

From: 05/01/2018 To: 05/31/2018

Only 24 months of previous reports from today's date can be searched
Only 90 days of reports can be viewed at one time

[Create Report](#)

Billing NPI

Billing NPI:

☐ Select All

☒ 1000000000
☐ 1000000001
☐ 1000000002
☐ 1000000003
☒ 1000000004
☐ 1000000005

Servicing NPI

Servicing NPI:

☐ Select All

☒ 1000000000
☐ 1000000001
☒ 1000000002
☐ 1000000003
☐ 1000000004
☐ 1000000005

Negative Balance Reports from 05/01/2018 till 05/31/2018

RA Date	Billing NPI	Billing Provider Name	Servicing NPI	Servicing Provider Name	Action
05/17/2018	1000000004	Spectra Laboratories Inc	1000000004	Spectra Laboratories Inc	View
05/17/2018	1000000007	Spectra Laboratories Inc	1000000007	Spectra Laboratories Inc	View

<< < 1 > >> Go to page: 1 Row count: 10 Showing 1-2 of 2

Figure 46: Separate Negative Balance by Billing NPI/Servicing NPI Report View

Health Home Reports

The Medicaid Portal allows Health Home providers and their facility staff access to several reports. The Health Home Reports can be found in the **Reports** sub-menu by hovering over Health Home to view the options. The user will be directed to the desired report after clicking on the Health Home sub-menu option.

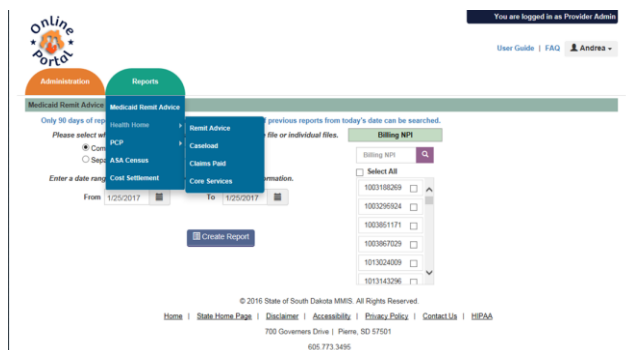


Figure 47: Health Home Reports Sub-Menu Selections

Health Home Remittance Advice

Health Home providers and their staff have the ability to view Health Home Remittance Advice reports via the Online Portal. Similar to the Medicaid Remittance Advice reports, users have the ability to generate Remittance Advice reports within a 90 day date span by Combined Billing/Servicing NPI or Separated by Billing/Servicing NPI.

In the Combined report view, the user can select a Billing NPI and the report view populates with remittances for all dates where that Billing NPI received a remittance advice. In the remittance advice view, the PDF report will combine all the Servicing NPIs which received remittance advice on that report date.

Health Home Remit Advice

Only 52 weeks of previous reports from today's date can be searched.

Please select whether you want to view all servicing NPI's in one file or individual files.

☒ Combined Remittance by BNPI
☐ Separate Remittances by BNPI / SNPI

Enter a date range (MM/DD/YYYY) to view your organization's information.

From 10/26/2016 To 1/25/2017

Create Report

Billing NPI

1013143296

Select All

1013143296 ☒

1013177393 ☐

1013350891 ☐

1013921733 ☐

1013931336 ☐

1013939826 ☐

Health Homes Remittance Advices from 10/26/2016 till 1/25/2017

RA Date	Billing NPI	Billing Provider Name	Servicing NPI	Servicing Provider Name	Action
---------	-------------	-----------------------	---------------	-------------------------	--------

In the Separate by Billing/Servicing NPI report view, the user can select one or more Servicing NPIs associated with a Billing NPI to view remittance advice reports for. In the remittance advice view, the PDF report will only display the Servicing NPIs which received remittance advice on the date viewed, based upon their selection criteria of Servicing NPI(s).

Health Home Remittance Advice

Only 52 weeks of previous reports from today's date can be searched.

Please select whether you want to view all servicing NPI's in one file or individual files.

☐ Combined Remittance by BNPI

☒ Separate Remittances by BNPI / SNPI

Enter a date range (MM/DD/YYYY) to view your organization's information.

From: 10/26/2016 To: 1/25/2017

Create Report

Health Homes Remittance Advices from 10/26/2016 till 1/25/2017

RA Date	Billing NPI	Billing Provider Name	Servicing NPI	Servicing Provider Name	Action
---------	-------------	-----------------------	---------------	-------------------------	--------

Figure 48: Health Home Remittance Advice - Separate Remittance by BNPI/SNPI Screen

Health Home Caseload

Health Home providers and their staff may view and export their current Health Home Caseload reports each month in the Medicaid Portal. The Health Home Caseload report view includes two options for Caseload reports. By selecting the Recipient & Family Information radio button, users will generate their monthly Caseload report to view in the Portal or to Export to Excel. By selecting the Export to HIE radio button, users will generate a Health Home Caseload report in the required format for being uploaded to HIE. This new functionality replaces the previous means by which providers manually tracked the required information to upload.

Steps To generate a Health Home Caseload Report:

1. Under the Reports menu, hover the mouse over Health Home to display the sub-menu options
2. Click on Caseload
3. Select year from the Report Year dropdown
4. Select month from the Report Month dropdown
5. Select Recipient & Family Information to view the Caseload report
6. Select the Billing NPI(s) for this report
 - a. If generating a report for multiple Billing NPIs, users can select each Billing NPI by checking the individual checkboxes or by clicking the Select All checkbox to generate one report for all available Billing NPIs
 - b. Users can search for a Billing NPI by entering the Billing NPI being searched in the text box below the green Billing NPI header, next to the purple magnifying glass icon and then clicking the magnifying glass icon to perform the search. The Billing NPI will be highlighted in red for easier identification. If Billing NPI is not found, user will receive a notification that no results were returned for the Billing NPI search

Medicaid Portal

Reports

Health Home Caseload

Report Year: 2017

Report Month: 1

☒ Recipient & Family Information

☐ Export to HIE

Billing NPI

Servicing NPI

Clinic Id

Generate Report

7. The Servicing NPI list will populate based upon the selected Billing NPI to only populate those which are associated with the selected Billing NPI(s)
 - a. Provider Admins will have the ability to generate Caseload reports for all Servicing NPIs associated with their Billing NPI(s), by default.
 - a. Since Provider User access is limited by Billing/Servicing NPI combination, it is up to the Provider Admin to update the existing Provider User accounts with the appropriate Servicing NPI access and permissions required to view their reports.
 1. Provider Admins are also responsible for adding newly approved providers to their existing user accounts, when that user requires access to reports for the Servicing NPI.
 - b. If you are a Provider User, your Servicing NPI list will only populate with the Servicing NPIs that your Provider Admin has given you permission to view reports for.
 - a. If there is a Servicing NPI missing in your list, please contact your Provider Admin user to request that they add the Billing/Servicing NPI combination into your account access.
 - b. Newly approved Servicing NPIs which have completed the SD Medicaid Provider Enrollment or Revalidation process will be available to Provider Admins once the Portal is synced with the SD MEDX Provider Enrollment system. This process is scheduled weekly.
 1. If the Servicing NPI is not listed although it is active in SD MEDX and has a Caseload, please contact the DSS Medicaid Portal staff.
 2. If the Servicing NPI is not approved or has not completed the Enrollment or Revalidation process, their records will not be available in the Portal until SD MEDX has been updated to reflect their Enrollment status.

Reports

Health Home Caseload

Report Year: 2017
Report Month: 1

☒ Recipient & Family Information
☐ Export to HIE

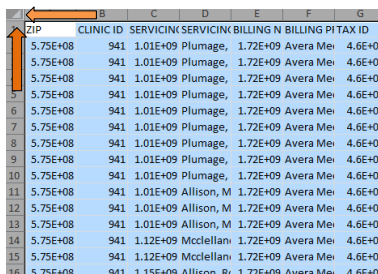
Billing NPI	Servicing NPI	Clinic Id
1720326713	1013118512	
1740355635	1013938844	
1750488730	1013981927	
1760542278	1124062823	
1770505760	1154393742	
1770558405	1245595081	

[Generate Report](#)

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 700 Governors Drive | Pierre, SD 57501

8. Click Generate Report button
 - a. The screen will refresh to display the Caseload report. Users can expand and collapse individual Servicing NPIs by clicking the "+" sign to view the provider's Caseload records.
9. Click Export to Excel button to download and open the Caseload report in Excel format

- a. After clicking Export to Excel, user will see a flashing yellow notification bar along the bottom of their screen asking to Open, Save, or Cancel the report export.
- b. Click 'Open' to download and open the report in Excel
- c. The report will be displayed in default column width view, and needs to be expanded to auto-fit the column contents for easier review
 - a. To expand and auto-fit the contents, click on the downward facing arrow in the upper right hand column of the Excel document between column "A" and row 1. This will select or highlight the entire worksheet.
 - b. After highlighting the worksheet, hover mouse over the line between columns "B" and "C" which will turn the pointer to a line with arrows on the left and right side then double click.
 1. If the mouse isn't in the right location, the sheet will be deselected and user must reselect and try again.
 2. Users can also auto-fit one column at a time by double clicking the line between columns for each which does not display properly.



ZIP	CLINIC ID	SERVICE	BILLING N	BILLING	PITAX ID
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Plumage,	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Allison, M	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Allison, M	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.01E+09 Allison, M	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.12E+09 McClellan	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.12E+09 McClellan	1.72E+09	Avera Mei	4.6E+08
5.75E+08	941	1.15E+09 Allison, R	1.72E+09	Avera Mei	4.6E+08

Health Home Claims Paid

The Health Home Claims Paid reports are now available.

Steps To generate a Health Homes Claims Paid Report:

1. Under the Reports menu, hover the mouse over Health Home to display the sub-menu options
2. Click on Claims Paid
3. Select claim type from the Claim Type dropdown
4. Choose Report by Paid Date or Date of Service
5. Select your Billing NPI

6. Select your Servicing NPI

Health Home Claims Paid

Only 52 weeks of previous reports from today's date can be searched. Only 31 days of reports can be viewed at one time.

ClaimType: All

☐ Report by Paid Date
☐ Report by Date of Service

Billing NPI

Billing NPI

☐ Select All

9500020992 ☐

Servicing NPI

Servicing NPI

☐ Select All

Recip Id

Recip Id

No Recip Id Selected.

7. Enter the Recipient Medicaid ID (Optional)

8. Click the Generate Report button

9. Click to Export your report to Excel

Please Click on Export to Excel button to export the results to Excel.

Health Home Core Services: Granting Permissions

An individual with the Provider Admin Role should add the H.Home Cores Service permissions to each provider who will be completing the Health Home Core Services report. Bring up the user and move the H.Home Core Services from the Permissions Available to the Permissions Selected by clicking the arrow box to move it.

Add State User

Permissions Available

☐ Select All

Listing

☐ Administration

☐ Census Status Report

☐ Eligibility

☐ H.Home - Case Load

☐ H.Home - Claims Paid

☐ **H.Home - Core Services**

☐ H.Home - RA

Permissions Selected

☐ Select All

The screenshot shows the 'Update Provider Admin' form. It has sections for 'Tax Id', 'Billing NPI', and 'Billing NPI's that you are granting access to'. There are also 'Permissions Available' and 'Permissions Selected' sections. A red box highlights the 'H Home - Core Services' option in the 'Permissions Available' list. The form includes 'Add', 'Back', 'Update', and 'Cancel' buttons.

Completing the Core Service Report

Select the Report year and the report quarter that needs to be completed. IE 2018, Jan1 – March 31
Click Generate the Report.

The screenshot shows the 'Health Home Core Services Report' form. It includes a 'Report Year' dropdown set to 2017 and a 'Report Quarter' dropdown set to Oct 1 - Dec 31. A blue arrow points from the 'Generate Report' button to the table below. The table has columns for Recip ID, Recip Name, Response, Modified Name, Date, Billing NPI, Servicing NPI, Recipient ID, Recipient Name, Per Month Rate, Months of Eligibility, Total To Be Paid, Core Service Provided, Last Modified By, Modified Date, and Locked. The table is currently empty, showing 'No data available!'. There are 'Search' and 'Reset' buttons at the bottom right.

Complete the report by clicking on yes or no for each recipient. Hit submit. The Submit button will not open until all responses are complete. You will receive a message indicating the report was successfully submitted. Report should be downloaded and or printed for future use.

For each recipient in the list, select yes or no to indicate whether a core service was provided for that person. Click the submit button to submit your responses.

Responses for the current quarter must be submitted by: 1/31/2018
Responses last saved on: 3/1/2018 10:45:18 AM
Responses last submitted on: 3/1/2018 9:30:36 AM

Total ESTIMATED payment:

\$1,676.00

Download

Print

Submit

Recip ID	Recip Name	Response	Modified Name	Date	<div><div>Search</div><div>Reset</div></div>					
Billing NPI	Servicing NPI	Recipient ID	Recipient Name	Per Month Rate	Months of Eligibility	Total To Be Paid	Core Service Provided	Last Modified By	Modified Date	Locked
1720129638	1720129638			\$250.00	3	\$750.00	<input checked="" type="radio"/> Yes <input type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$49.00	3	\$147.00	<input checked="" type="radio"/> Yes <input type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$29.00	3	\$87.00	<input type="radio"/> Yes <input checked="" type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$250.00	3	\$750.00	<input checked="" type="radio"/> Yes <input type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$49.00	2	\$98.00	<input type="radio"/> Yes <input checked="" type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$250.00	3	\$750.00	<input type="radio"/> Yes <input checked="" type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$29.00	3	\$87.00	<input type="radio"/> Yes <input checked="" type="radio"/> No	Prathakota, Raj	03/01/2018	
1720129638	1720129638			\$29.00	1	\$29.00	<input checked="" type="radio"/> Yes <input type="radio"/> No	Prathakota, Raj	02/26/2018	
<div><< < 1 > >> Go to page: 1 < > Row count: 20 < > Showing 1-8 of 8</div>										

Primary Care Provider (PCP) Reports

The Medicaid Portal allows Primary Care Providers (PCPs) access to several reports.

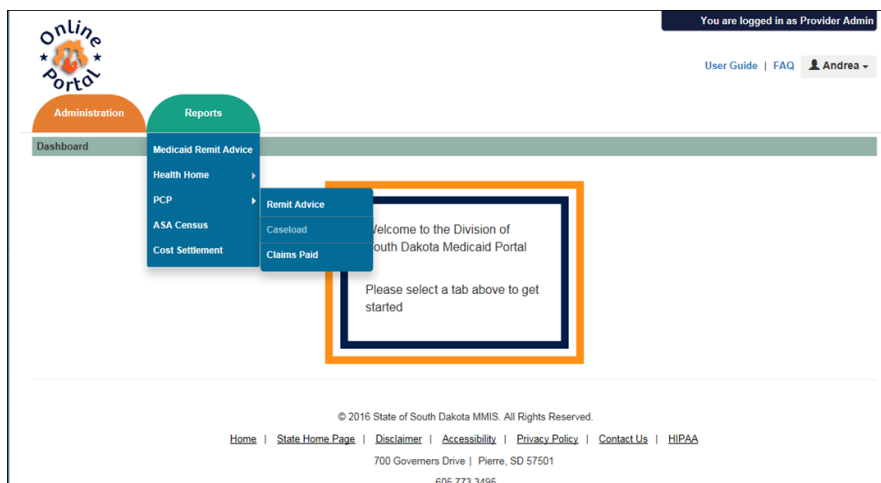


Figure 51: Primary Care Provider (PCP) Report Sub-Menu Selections

PCP Remittance Advice

PCPs and their staff have the ability to view PCP Remittance Advice reports via the Online Portal. Similar to the Medicaid Remittance Advice and Health Home Remittance Advice reports, users have the ability to generate Remittance Advice reports within a 90 day date span by Combined Billing/Servicing NPI or Separated by Billing/Servicing NPI.

In the Combined report view, the user can select a Billing NPI and the report view populates with remittances for all dates where that Billing NPI received a remittance advice. In the remittance advice view, the PDF report will combine all the Servicing NPIs which received remittance advice on that report date.

The screenshot shows the 'PCP Remit Advice' interface. It includes a search filter for 'Billing NPI' with a dropdown menu showing several NPIs, with '1447251350' selected. Below the search filter, there are radio buttons for 'Combined Remittance by BNPI' (selected) and 'Separate Remittances by BNPI / SNPI'. A date range selector is set from '01/01/2017' to '1/25/2017'. A 'Create Report' button is visible. At the bottom, a table header shows 'PCP Remittance Advices from 01/01/2017 till 1/25/2017' with columns for RA Date, Billing NPI, Billing Provider Name, Servicing NPI, Servicing Provider Name, and Action.

Figure 52: PCP Remittance Advice - Combined Remittance by BNPI Screen

In the Separate by Billing/Servicing NPI report view, the user can select one or more Servicing NPIs associated with a Billing NPI to view remittance advice reports for. In the remittance advice view, the PDF report will only display the Servicing NPIs which received remittance advice on the date viewed, based upon their selection criteria of Servicing NPI(s).

The screenshot shows the 'Health Home Remit Advice' interface. It includes search filters for both 'Billing NPI' (with '1013143296' selected) and 'Servicing NPI' (with '1578567319' selected). Below the filters, there are radio buttons for 'Combined Remittance by BNPI' and 'Separate Remittances by BNPI / SNPI' (selected). A date range selector is set from '10/26/2016' to '1/25/2017'. A 'Create Report' button is visible. At the bottom, a table header shows 'Health Homes Remittance Advices from 10/26/2016 till 1/25/2017' with columns for RA Date, Billing NPI, Billing Provider Name, Servicing NPI, Servicing Provider Name, and Action.

PCP Caseload

Primary Care Providers (PCPs) and their staff may view and export their current PCP Caseload reports each month in the Medicaid Portal. By selecting the Recipient & Family Information radio button, users will generate their monthly Caseload report to view in the Portal or to Export to Excel.

Steps To generate a PCP Caseload Report:

1. Under the Reports menu, hover the mouse over PCP to display the sub-menu options
2. Click on Caseload
3. Select year from the Report Year dropdown

4. Select month from the Report Month dropdown
5. Select Recipient & Family Information to view the Caseload report
6. Select the Billing NPI(s) for this report
 - a. If generating a report for multiple Billing NPIs, users can select each Billing NPI by checking the individual checkboxes or by clicking the Select All checkbox to generate one report for all available Billing NPIs
 - b. Users can search for a Billing NPI by entering the Billing NPI being searched in the text box below the green Billing NPI header, next to the purple magnifying glass icon and then clicking the magnifying glass icon to perform the search. The Billing NPI will be highlighted in red for easier identification. If Billing NPI is not found, user will receive a notification that no results were returned for the Billing NPI search.

The screenshot shows the 'PCP Caseload' report interface. On the left, there are dropdowns for 'Report Year' (set to 2017) and 'Report Month' (set to 1), and a radio button for 'Recipient & Family Information'. To the right are three columns: 'Billing NPI', 'Servicing NPI', and 'Clinic Id'. Each column has a search bar with a magnifying glass icon and a 'Select All' checkbox. The 'Billing NPI' column shows a list of NPIs: 1417927559 (checked), 1427003946, 1427090760, 1437243607, and 1487602843. The 'Servicing NPI' column shows a list with 1417927559. The 'Clinic Id' column is empty. At the bottom right is a green 'Generate Report' button.

Figure 54: PCP Caseload Report Screen Billing NPI List

7. The Servicing NPI list will populate based upon the selected Billing NPI to only populate those which are associated with the selected Billing NPI(s)
 - a. Provider Admins will have the ability to generate Caseload reports for all Servicing NPIs associated with their Billing NPI(s), by default.
 - a. Since Provider User access is limited by Billing/Servicing NPI combination, it is up to the Provider Admin to update the existing Provider User accounts with the appropriate Servicing NPI access and permissions required to view their reports.
 1. Provider Admins are also responsible for adding newly approved providers to their existing user accounts, when that user requires access to reports for the Servicing NPI.
 - b. If you are a Provider User, your Servicing NPI list will only populate with the Servicing NPIs that your Provider Admin has given you permission to view reports for.
 - a. If there is a Servicing NPI missing in your list, please contact your Provider Admin user to request that they add the Billing/Servicing NPI combination into your account access.
 - b. Newly approved Servicing NPIs which have completed the SD Medicaid Provider Enrollment or Revalidation process will be available to Provider Admins once the Portal is synced with the SD MEDX Provider Enrollment system. This process is scheduled nightly.
 1. If the Servicing NPI is not listed although it is active in SD MEDX and has a Caseload, please contact the DSS Medicaid Portal staff.

2. If the Servicing NPI is not approved or has not completed the Enrollment or Revalidation process, their records will not be available in the Portal until SD MEDX has been updated to reflect their Enrollment status.

PCP Caseload

Report Year: 2017
Report Month: 1

☒ Recipient & Family Information

Billing NPI	Servicing NPI	Clinic Id
<input type="checkbox"/> Select All	<input type="checkbox"/> Select All	<input type="checkbox"/> Select All
<input checked="" type="checkbox"/> 1013143296	<input checked="" type="checkbox"/> 1013143296	<input type="checkbox"/> 0490
<input type="checkbox"/> 1013921733	<input type="checkbox"/> 1083679625	
<input type="checkbox"/> 1013931336	<input type="checkbox"/> 1083779821	
<input type="checkbox"/> 1023203619	<input type="checkbox"/> 1093090342	
<input type="checkbox"/> 1043231905	<input type="checkbox"/> 1215100813	
<input type="checkbox"/> 1043241466	<input type="checkbox"/> 1255309589	

8. Click Generate Report button
 - a. The screen will refresh to display the Caseload report. Users can expand and collapse individual Servicing NPIs by clicking the “+” sign to view the provider’s Caseload records.
9. Click Export to Excel button to download and open the Caseload report in Excel format
 - a. After clicking Export to Excel, user will see a flashing yellow notification bar along the bottom of their screen asking to Open, Save, or Cancel the report export.
 - b. Click ‘Open’ to download and open the report in Excel
 - c. The report will be displayed in default column width view, and needs to be expanded to auto-fit the column contents for easier review
 - a. To expand and auto-fit the contents, click on the downward facing arrow in the upper right hand column of the Excel document between column “A” and row 1. This will select or highlight the entire worksheet.
 - b. After highlighting the worksheet, hover mouse over the line between columns “B” and “C” which will turn the pointer to a line with arrows on the left and right side then double click.
 1. If the mouse isn’t in the right location, the sheet will be deselected and user must reselect and try again.

- Users can also auto-fit one column at a time by double clicking the line between columns for each which does not display properly.

	B	C	D	E	F	G
	ZIP	CLINIC ID	SERVICING NPI	SERVICING NAME	BILLING NPI	BILLING NAME TAX ID
4	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
5	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
6	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
7	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
8	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
9	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
10	5.75E+08	941	1.01E+09	Plumage, M	1.72E+09	Avera Mei 4.6E+08
11	5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Mei 4.6E+08
12	5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Mei 4.6E+08
13	5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Mei 4.6E+08
14	5.75E+08	941	1.12E+09	McClellan, R	1.72E+09	Avera Mei 4.6E+08
15	5.75E+08	941	1.12E+09	McClellan, R	1.72E+09	Avera Mei 4.6E+08
16	5.75E+08	941	1.15E+09	Allison, R	1.72E+09	Avera Mei 4.6E+08

Figure 56: PCP Caseload Report Export to Excel Default View

PCP Claims Paid

The PCP Claims Paid reports are now available.

Steps To generate a PCP Claims Paid Report:

- Under the Reports menu, hover the mouse over PCP to display the sub-menu options
- Click on Claims Paid

PCP Claims Paid

Only 52 weeks of previous reports from today's date can be searched. Only 31 days of reports can be viewed at one time.

ClaimType: All ▼

☐ Report by Paid Date ⓘ
☐ Report by Date of Service ⓘ

Billing NPI

Billing NPI

☐ Select All

9500020992 ☐

Servicing NPI

Servicing NPI

☐ Select All

Recip Id

Recip Id

No Recip Id Selected.

- Select claim type from the Claim Type dropdown
- Choose Report by Paid Date or Date of Service
- Select your Billing NPI
- Select your Servicing NPI
- Enter the Recipient Medicaid ID (Optional)
- Click the Generate Report button
- Click to Export your report to Excel

Please Click on Export to Excel button to export the results to Excel.

Census Status Report

The Census Status Report is now available through the Medicaid Portal.

Steps To generate a Census Status Report:

1. Hover the mouse over the Reports menu
2. Click on Census Status Report
3. Select year from the Report Year dropdown
4. Select week from the Report Week dropdown
5. Select the Billing NPI(s) for this report
 - a. This Billing NPI, which is the same as the Service NPI for nursing facility providers, is found on the upper left corner of the current Census Status Report

080000 SS03JS62 SS036050 SOUTH DAKOTA STATE DEPARTMENT OF SOCIAL SERVICES -
05/03/2017 22.08.37 2017123 OFFICE OF PROGRAM MANAGEMENT - ADULT SERVICES AN
FILE= MDS+ CASE MIX

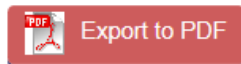
SERVICE NPI: 1295174332

FACILITY RESIDENT CENSUS/STATUS REPORT
05/03/2017

- b. Users can search for a Billing NPI by entering the Billing NPI being searched in the text box below the green Billing NPI header, next to the purple magnifying glass icon and then clicking the magnifying glass icon to perform the search. The Billing NPI will be highlighted in red for easier identification. If Billing NPI is not found, user will receive a notification that no results were returned for the Billing NPI search

- c. If generating a report for multiple Billing NPIs, users can select each Billing NPI by checking the individual checkboxes or by clicking the Select All checkbox to generate one report for all available Billing NPIs
6. Click the Generate Report button
7. Choose either the PDF version or the Excel version to open your report

Please click on a button to view or export the results.



Adjudicated Claims Listing Report

The viewing of provider Adjudicated Claims Listing Report (Cost Settlement) is now available through the Medicaid Portal. Fiscal reports are available at the end of the month following the end of your fiscal year. This is the same cycle as your previous paper reports. Special requests are still available and any report received since 3/22/2017 is accessible.

Steps To generate an Adjudicated Claims Listing Report:

1. Hover the mouse over the Reports tab to see the drop-down menu
2. Click on Adjudicated Claims Listing
3. Choose Type of report – Inpatient, Outpatient, or Clinic
4. Choose Billing NPI and click on the purple search button
5. Select Report Month
6. Click the Generate Report button
7. Click View to see the PDF

Administration

Eligibility

Reports

Communications

Adjudicated Claims Listing

Select report type

☐ Select All
 ☒ In Patient
 ☐ Out Patient
 ☒ Clinic

New Request

Request a new Ad-Hoc report

Billing NPI

Billing NPI

☐ Select All

1083638357
 1134140825
 1235218215
 1235406455
 1396828547
 1437243607

Servicing NPI

Servicing NPI

☐ Select All

Report Month

☐ Select All

Create Report

View all existing reports

Adjudicated Claims Report List for selected criteria

Report Run date	Report Period	Billing NPI	Billing Provider Name	Service Type	Fiscal Year End	Action	Type
		1720129638	Sanford Clear Lake Clinic			In Process	Ad-Hoc
		1831103449	Sanford Hospital Webster			In Process	Ad-Hoc

<< < 1 > >> Go to page: 1 Row count: 10 Showing 1-2 of 2

Steps to submit a New Request for an Adjudicated Claims Listing Report that is not available:

1. Select New Request
2. Select Billing and Servicing NPI
3. Select the End Date by Month and Year
4. Click Submit
5. Reports will take approximately ten minutes to be available

The screenshot shows the 'Adjudicated Claims Listing' interface. At the top, there are four tabs: Administration (orange), Eligibility (blue), Reports (green), and Communications (orange). Below the tabs is a header bar with the title 'Adjudicated Claims Listing'. The main form area contains several fields: 'Select report type' with a dropdown menu (options: Select All, In F, Out, Cli), 'Billing NPI', 'Servicing NPI', and 'Report Month'. A 'New Ad-Hoc Request' modal window is open, showing a 'Billing NPI' search field with a list of NPIs (1083638357, 1134140825, 1235218215, 1235406455, 1396828547, 1437243607), a 'Servicing NPI' search field, and a 'Fiscal Year End Date' calendar for 2018. The calendar shows months from Jan to Dec, with May selected. A note below the calendar states: 'If the Fiscal Year ends after today's date, please use the PREVIOUS fiscal year end date.' At the bottom of the modal are 'Submit' and 'Close' buttons.

Eligibility Inquiry

The Medicaid Online Portal allows SD Medicaid providers to check recipient records online for SD Medicaid eligibility. **Eligibility** can be found as half-moon Menu on the top of a user's Portal account screen. This feature allows them to check the eligibility up to five unique recipients with required dates of services or up to five different dates of services for a single recipient. Searches will be limited to a six month date span at one time.



Figure 1: Portal Permissions available are displayed as Half-Moon Menus

Choose Servicing NPI

Providers have option to search and choose the **Servicing NPI** to view the recipient eligibility and copay information.

Figure 2: Choosing Servicing NPI

Search Options

Eligibility inquiry screen have two search options, Providers can search with recipient ID or recipient information like **First Name, Last Name**, etc.

Figure 3: Recipient search Options screen

- a. **Search by Recipient ID** – Providers can search with recipient id to check the recipient records online.
 1. Select **From** date -**To** date will populate to **end** of Month.
 2. Enter the **Recipient Id**.
 3. Click **Add**.
 4. The screen will display the **AID, Recipient ID, First Name, Last Name, SSN, Birth Date, From Date, To Date, Action** columns, **Trashcan** and **Check Eligibility** buttons.
- 4a. Click on **Trashcan** to delete the recipient record from list.



Recipient Eligibility Inquiry								
AID	Recipient ID	First Name	Last Name	SSN	Birth Date	From Date	To Date	Action
	000000001					06/01/2016	06/30/2016	 

Figure 4: Delete the recipient record from list.

5. Click **Check Eligibility** button.

- The screen will refresh and display the recipient data and **View** button will appears.
- Click **View** button in the **Action** column to check the recipient eligibility.
User will have option to **open** or **save** PDF file to check the recipient eligibility.

Recipient Eligibility Inquiry									
	AID	Recipient ID	First Name	Last Name	SSN	Birth Date	From Date	To Date	Action
ACTIVE	40	001234567	Joe	Samuel		01/01/1982	06/01/2016	06/30/2016	View

This is not a guarantee of benefits or payment. The data shown is the latest information available. All payments are subject to any limitation or exclusions that are in effect at the time the patient receives services.

Check Eligibility

Do you want to open or save **Eligibility_Results7_25_2017.pdf** (152 KB) from **appstest.sd.gov**? Open Save Cancel x

Figure 5: Eligibility inquiry search by recipient ID

b. Search by Name, SSN, Date of Birth-

Provider will have option to search for recipients using three out of four required information fields from **First Name, Last Name, Last four digits of SSN and Date of Birth**.

Search Option # 2 :

3 out of 4 are required for a search.

Recipient First Name

Recipient Last Name

Last 4 of SSN

Date of Birth

Add

Reset

Figure 6: Eligibility inquiry search with Name, SSN and Date of Birth.

- Select **From** date -**To** date will populate to **end** of Month.
- Enter complete 3 data fields out of 4 from **First Name, Last Name, Last 4 digits of SSN and Date of Birth**.
- Click **Add**.
- The screen will display the **AID, Recipient ID, First Name, Last Name, SSN, Birth Date, From Date, To Date, Action** columns, **Trashcan** and **Check Eligibility** button.
- Click **Check Eligibility**.
- The screen will refresh and display the recipient data and **View** button will appears.
- Click **View** button in the **Action** column to check the recipient eligibility.
User will have option to **save** or **open** the PDF file to check the recipient eligibility.

Recipient Eligibility Inquiry									
	AID	Recipient ID	First Name	Last Name	SSN	Birth Date	From Date	To Date	Action
			Joe	Samuel	1234		06/01/2016	06/30/2016	

This is not a guarantee of benefits or payment. The data shown is the latest information available. All payments are subject to any limitation or exclusions that are in effect at the time the patient receives services.

Check Eligibility

Figure 7: Eligibility inquiry search results by Name, SSN, and DOB

Search multiple recipients

Provider can search by recipient Id up to 5 recipients and search will be limited to one month at one time.

1. Repeat the steps from **1** to **3** for each recipient.
2. After adding multiple recipients then repeat steps 5 & 7
3. Click **View** button in the **Action** column to check the recipient eligibility for individuals.

User will have option to **save** or **open** the PDF file to check the recipient eligibility.

Recipient Eligibility Inquiry									
	AID	Recipient ID	First Name	Last Name	SSN	Birth Date	From Date	To Date	Action
ACTIVE	31	001234567	SHARON K	DVORAK		01/01/1982	06/01/2016	06/30/2016	View
ACTIVE	74	123456789	SCOTT D	DEKING		02/02/1982	05/01/2016	05/31/2016	View
ACTIVE	87	001235678	KELTON R	BROCKELMAN		03/02/1982	03/01/2016	03/31/2016	View
ACTIVE	73	001122334	DONALD J	DOYLE		04/01/1982	02/01/2016	02/29/2016	View
ACTIVE	87	005522114	DELORIS A	ALLRED		10/10/2010	01/01/2016	01/31/2016	View

This is not a guarantee of benefits or payment. The data shown is the latest information available. All payments are subject to any limitation or exclusions that are in effect at the time the patient receives services.

[Check Eligibility](#)

Figure 8: Eligibility inquiry screen for multiple recipients

View Recipient's Eligibility Response File

Providers will have ability to check recipient eligibility dates of service with copay information.

08/02/2017	Recipient Eligibility Inquiry	South Dakota Medicaid Online Portal
Submitter		Page 1 of 1
Name : Hospital	NPI : 0000000001	
Inquiry Date From: 07/01/2017	Inquiry Date To: 07/31/2017	
Transaction ID : 123456-1		
Insured Information		
Recipient ID: 001234567	Recipient Name: Joe Samuel	
Gender: M	Date of Birth: 01/01/1982	
Eligibility Dates are valid for current query.		
31-Active Coverage: Medicaid - Full Coverage		
Eligibility : 7/1/2017 - 7/31/2017		
Co-Payment Required		
Amount : \$50.00		
Coordination of benefits		
MEDICARE-A	Eligibility : 7/1/2017 - 7/31/2017	
Policy : 000001234C1		

Figure 9: Eligibility response file

List of Eligibility Aid Categories: The Medicaid Online Portal will display recipient's current eligibility aid category.

AID CATEGORY	DESCRIPTION
10	Aged Person - Title XIX - With a Medicaid Income Trust (Grandfather Clause)
11	Aged Person - Title XIX - Eligible through SSI eligibility
12	Aged Person - Title XIX - SSI Related Groups

13	Aged Person - Title XIX - 300% special income group
15	Aged Person - Title XIX - Waivered SSI
16	Aged Person -Title XIX - Waivered Non-SSI
20	Blind Person - Title XIX - With a Medicaid Income Trust (Grandfather Clause)
21	Blind Person - Title XIX - Eligible through SSI eligibility
22	Blind Person - Title XIX - SSI Related Groups
23	Blind Person - Title XIX - 300% special income group
30	Disabled Person - Title XIX - With a Medicaid Income Trust
31	Disabled Person - Title XIX - Eligible through SSI eligibility
32	Disabled Person - Title XIX - SSI Related Groups
33	Disabled Person - title XIX - 300% special income group
35	Home and Community Based Services - Title XIX - Child, SSI
36	Home and Community Based Services - Title XIX - Adult, SSI
37	Home and Community Based Services - Title XIX - Child, Other
38	Home and Community Based Services - Title XIX - Adult, Other
40	Parent and Caretaker Relatives - Title XIX
41	Transitional Medicaid Benefits - Title XIX - Medical only due to Increased Earnings
43	Breast and Cervical Cancer (BCC) - Title XIX-
45	Title XIX - Automatic Newborns
46	Title XIX for Pregnant Women
47	Title XIX for pregnancy related postpartum care
53	Foster Care - DSS Custody Not IVE (XIX)
54	Former Foster Care (XIX)
57	Foster Care - IVE only (XIX)
65	State Funded Adoption
67	Subsidized Adoption - Title XIX
71	Qualified Medicare Beneficiary (QMB) - Aged XIX (Medicare Premium, Co-Pay)
72	Special Low-Income Medicare Beneficiary - Aged XIX (Part B Premium Only)
73	Qualified Medicare Beneficiary (QMB) - Disabled XIX (Medicare Premium, Co-Pay)
74	Special Low-Income Medicare Beneficiary - Disabled XIX (Part B Premium Only)
75	Medicaid Children
76	Medicaid Expansion - XXI
77	Expanded XIX - Pregnant Woman - Pregnancy Related Coverage Only
78	Children's Health Insurance Program (CHIP) XXI - Uninsured children
80	Chronic Renal eligible - State Funded
86	Qualified Individual (1) - Aged XIX (Part B Premium Only)
87	Qualified Individual (1) - Disabled XIX (Part B Premium Only)
90	Refugee Resettlement Program - Medical only XIX

Communications: Reviews and Requests

The Medicaid Online Portal allows SD Medicaid providers to submit appeals for reviews and requests. **Communications** can be found as a half-moon Menu on the top of the user's Portal account screen. This feature allows the provider to submit a review after denial or a request for coverage of a medically necessary service.



How to Grant Permissions

An individual with the Provider Admin Role has the ability to add Communications Modify or Communication View Only permissions to the appropriate Provider User staff. Open the user permissions and move the appropriate role from Permissions Available to the Permissions Selected by selecting it then clicking the arrow box to move it.

Permissions Available		Permissions Selected
<input type="checkbox"/> Select All <input type="checkbox"/> Negative Balance Report <input type="checkbox"/> PCP - Case Load <input type="checkbox"/> PCP - Claims Paid <input type="checkbox"/> PCP - RA <input checked="" type="checkbox"/> Communications Modify <input type="checkbox"/> Communications View Only	<div>→</div> <div>←</div>	<input type="checkbox"/> Select All <input type="checkbox"/> Eligibility <input type="checkbox"/> Medicaid Remit Advice

Status Definitions

Status definitions and what actions can be allowed by the provider.

Approved – DSS has approved your Review or Request submission. This is view only.

Denied – DSS has denied your Review or Request submission. This is view only.

In Process – This is saved in your work queue and only you and other users with the same NPI permissions can view. If you have Modify Permissions you can edit and submit to DSS or delete.

In Review – DSS is reviewing your submission. There is no view option.

New – This is a new submission that has not yet been viewed by DSS. You and other users with the same NPI permissions can view and Modify Permissions can delete.

Request for Info – This has been reviewed by DSS and sent back to the provider for additional information. If you have Modify Permissions this can be saved or updated and sent back to DSS for another review.

Resubmitted – This has been sent back to DSS for further review. This is view only.

How to Submit a New Review or Request

Steps to submit a Review or Request:

1. Under the Communications menu, hover the mouse to display the sub-menu options
2. Click on Reviews and Requests
3. Select **+Add Communication**

4. Select Review or Request type

Submit NCCI-MUE Review














Unresolved National Correct Coding Initiative or Medically Unlikely Edit denial

1. Enter **From** and **To DOS** (Date of Service)
2. Enter **Recipient ID**
3. Enter your internal **Patient Account Number** (Optional)
4. Enter **Remit Date** of your **last** denial. Date of submissions must be within six months of the date of service or three months of your last denial.
5. Enter **Claim Reference Number** of your last submitted claim.
6. Select applicable **Billing NPI**
7. Select applicable **Servicing NPI**

Add NCCI-MUE Review

*** Denotes required field. A record can only be saved if all required fields have been completed.**

Please include a description of the issue, the rationale for review, and supporting documentation including remediation steps taken by the provider. A new claim must be attached for reconsideration.

From DOS 	* 	To DOS 	* 	Billing NPI	Servicing NPI
Recipient ID 	*	Patient Account # 		Billing NPI 	Servicing NPI 
Last Remit Date 	* 	Claim Ref # 	*	Select One *	Select One *
				<div></div> <div></div>	

8. Add up to five **Attachments**. Attach a new claim and supporting documentation.
9. Enter **Comments** to include the description of the issue and the rationale for review.

Up to 5 attachments with a max of 10 mb each can be uploaded with the following formats. PDF, JPEG, GIF, Excel and Word.

 Add Attachment

Enter your comments here. Each comment has a 2500 character limitation. Comments are mandatory.

 Save

 Submit

 Close

Submit Sterilization Review














Unresolved Sterilization denial

1. Enter **From** and **To DOS** (Date of Service)
2. Enter **Recipient ID**
3. Enter your internal **Patient Account Number** (Optional)
4. Enter **Remit Date** of your **last** denial. Date of submissions must be within six months of the date of service or three months of your last denial.
5. Enter **Claim Reference Number** of your last submitted claim.
6. Select applicable **Billing NPI**
7. Select applicable **Servicing NPI**

Add Sterilization Review

*** Denotes required field. A record can only be saved if all required fields have been completed.**

Include the rationale for reconsideration and supporting documentation including medical records. Sterilizations must comply with Federal requirements in [42 CFR 441](#). A new claim must be attached for reconsideration.

From DOS 	* 	To DOS 	* 	Billing NPI	Servicing NPI
Recipient ID 	*	Patient Account # 		Billing NPI 	Servicing NPI 
Last Remit Date 	* 	Claim Ref # 	*	Select One *	Select One *
				<div></div> <div></div>	

8. Add up to five **Attachments**. Attach a new claim and supporting documentation.
9. Enter **Comments** to include the description of the issue and the rationale for review.

Up to 5 attachments with a max of 10 mb each can be uploaded with the following formats. PDF, JPEG, GIF, Excel and Word.

 Add Attachment

Enter your comments here. Each comment has a 2500 character limitation. Comments are mandatory.

 Save

 Submit

 Close

Submit Timely Filing Review

Unresolved Timely Filing denial

1. Enter **From** and **To DOS** (Date of Service)
2. Enter **Recipient ID**
3. Enter your internal **Patient Account Number** (Optional)
4. Enter **Remit Date** of your **last** denial. Date of submissions must be within six months of the date of service or three months of your last denial.
5. Enter **Claim Reference Number** of your last submitted claim.
6. Select **Add More Claim Reference Numbers** to enter your previous four submitted claims.
7. Select applicable **Billing NPI**
8. Select applicable **Servicing NPI**

Add Timely Filing Review

*** Denotes required field. A record can only be saved if all required fields have been completed.**

Provide a rationale explaining how the claim complies with timely filing, attach supporting documentation including explanations of benefits, and list all claim reference numbers associated with the timely filing denial. Supporting documentation that lacks sufficient detail will not be considered. A new claim must be submitted for reconsideration. For additional information about timely filing requirements consult [ARSD 67:16:35:04](#).

From DOS	*?	To DOS	*?	Billing NPI	Servicing NPI
Recipient ID	*	Patient Account #	?	Billing NPI	Servicing NPI
Last Remit Date	*?	Claim Ref #	*	Select One *	Select One *
<div style="background-color: #0070c0; color: white; padding: 2px 10px; border-radius: 3px;">Add More Claim Ref #'s</div>		Claim Ref #		<div style="background-color: #f0f0f0; padding: 2px; border: 1px solid #ccc;">[Redacted]</div>	
		Claim Ref #		<div style="background-color: #f0f0f0; padding: 2px; border: 1px solid #ccc;">[Redacted]</div>	
		Claim Ref #			
		Claim Ref #			
		Claim Ref #			

9. Add up to five **Attachments**. Attach a new claim and supporting documentation.
10. Enter **Comments** to include the description of the issue and the rationale for review.

Up to 5 attachments with a max of 10 mb each can be uploaded with the following formats. PDF, JPEG, GIF, Excel and Word.

Add Attachment

Enter your comments here. Each comment has a 2500 character limitation. Comments are mandatory.

✕ Save
✔ Submit
✕ Close

Submit Other Claim Review











Unresolved National Correct Coding Initiative or Medically Unlikely Edit denial

1. Enter **From** and **To DOS** (Date of Service)
2. Enter **Recipient ID**
3. Enter your internal **Patient Account Number** (Optional)
4. Enter **Remit Date** of your **last** denial. Date of submissions must be within six months of the date of service or three months of your last denial.
5. Enter **Claim Reference Number** of your last submitted claim.
6. Select applicable **Billing NPI**
7. Select applicable **Servicing NPI**

Add Other Claim Review

*** Denotes required field. A record can only be saved if all required fields have been completed.**

Please include a description of the issue, the rationale for reconsideration, and supporting documentation including remediation steps taken by the provider. A new claim must be attached for reconsideration.

From DOS 	*	To DOS 	*	Billing NPI	Servicing NPI
Recipient ID 	*	Patient Account # 		Billing NPI 	Servicing NPI 
Last Remit Date 	*	Claim Ref # 	*	Select One *	Select One *
					

8. Add up to five **Attachments**. Attach a new claim and supporting documentation.
9. Enter **Comments** to include the description of the issue and the rationale for review.

Up to 5 attachments with a max of 10 mb each can be uploaded with the following formats. PDF, JPEG, GIF, Excel and Word.

 Add Attachment

Enter your comments here. Each comment has a 2500 character limitation. Comments are mandatory.

 Save

 Submit

 Close

Submit Coverage Request



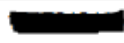




Per [ARSD 67:16:01:28](#) providers may request the department review coverage of services. **Note:** This process is not for review of specific claims or prior authorization of services. Claim specific information will not be considered.

1. Select applicable **Billing NPI**
2. Select applicable **Servicing NPI**
3. Enter the CPT, HCPC or Diagnosis Code that you are requesting coverage.

Add Coverage Request

*** Denotes required field. A record can only be saved if all required fields have been completed.**

Provide a description of the requested change including the rationale for the request. Requests must include supporting documentation. Examples of supporting documentation include medical studies, other payers' coverage policies including Medicare and surrounding states, and documentation supporting medical necessity.

Billing NPI	Servicing NPI
<input type="text" value="Billing NPI"/> 	<input type="text" value="Servicing NPI"/> 
Select One *	Select One *
<div> </div> <div> </div>	<div><input type="text"/></div>
	<input type="text" value="CPT/HCPC/DIAG"/> 

4. Add up to five **Attachments**. Attach a new claim and supporting documentation.
5. Enter **Comments** to include the description of the issue and the rationale for review.

Up to 5 attachments with a max of 10 mb each can be uploaded with the following formats. PDF, JPEG, GIF, Excel and Word.

 Add Attachment

Enter your comments here. Each comment has a 2500 character limitation. Comments are mandatory.





Submit Fee Schedule Request




Per [ARSD 67:16:01:28](#) providers may request the department review its fee schedule. **Note:** This process is not for review of specific claims. Claim specific information will not be considered.

1. Select applicable **Billing NPI**
2. Select applicable **Servicing NPI**
3. Enter the CPT, HCPC or Diagnosis Code that you are requesting coverage.

Add Fee Schedule Request

*** Denotes required field. A record can only be saved if all required fields have been completed.**

Provide a description of the requested change including the rationale for the request. The request must include supporting documentation. Examples of supporting documentation include other payers' coverage policies including Medicare and surrounding states.

Billing NPI	Servicing NPI	
<input type="text" value="Billing NPI"/> 	<input type="text" value="Servicing NPI"/> 	
Select One *	Select One *	<input type="text" value="CPT/HCPC"/> 
<div><div><div></div></div><div><div></div></div></div>	<div></div>	

4. Add up to five **Attachments**. Attach a new claim and supporting documentation.
5. Enter **Comments** to include the description of the issue and the rationale for review.

Up to 5 attachments with a max of 10 mb each can be uploaded with the following formats. PDF, JPEG, GIF, Excel and Word.

 Add Attachment

Enter your comments here. Each comment has a 2500 character limitation. Comments are mandatory.


 Save

 Submit

 Close

How to Respond to Request for Info

The state may ask providers for additional information before denying or approving a review or request.

+	201805140013	1417912114	1417912114	333253535	Other Claim Review	Request for Info ?		
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1. Select **Update**
2. Respond to **DSS comments** and questions with supporting information and **Attachments**
3. Select **Submit**

Update Coverage Request

Coverage Request ? *

201805140024 ? *

1033147384 ? *

1033147384 ? *

z5864 ?

Request for Info *

+ Add Attachment

1	<u>Desert.jpg</u>	826 KB	PROV
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Previous Comments - Provider

5/14/2018 -- DSS -- request for info

5/14/2018 -- Pamela -- this has been added

Current Comments - Provider

Enter your comments here. Each comment has a 2500 character limitation.

✓ Submit

✕ Close

Lock Feature

1. The Portal will allow only one provider account to update a Review or Request record at a time for records with a status of "New," "In Process" or "Request for Info".
 - a. When a provider clicks on the "Update" button for a Review or Request record, a lock flag will be placed on the record.

- b. While locked, the record cannot be modified by other users having access to the Billing NPI under which the communication record was created.
- c. When the user clicks the “Update” button, display the following error message: “This account has been locked by [user name].”
- d. Once the user leaves the screen or the session times out, the lock will be released.

Communication ID	Billing NPI	Servicing NPI	Recipient ID	Type	Status	Action
+ 201805150023	1427090760	1427090760	-	Fee Schedule Request	In Process	View
+ 201805150022	1427090760	1427090760	-	Coverage Request	New	View
+ 201805150011	1427090760	1427090760	000000009	Sterilization Review	New	View
+ 201805150010	1427090760	1427090760	000000009	NCCI-MUE Review	In Process	View
+ 201805150003	1427090760	1427090760	000000009	NCCI-MUE Review	In Process	View

Account locked by: Raj

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What to Expect After Submission

DSS will respond to your review within 30 days with **Approved**, **Denied**, or **Request for Info**. DSS will respond to your coverage or fee schedule request once per quarter.

Questions

This document and related Medicaid Portal documentation will be updated as regularly as possible to ensure users have access to the latest reference material for the Medicaid Portal functionality and use. If you have questions that have not been addressed in this documentation, please send an email to DSSOnlinePortal@state.sd.us for the most efficient assistance. Due to the high volume of Portal emails, please allow up to three business days for response.